

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Elise for Congress

ADDRESS (number and street)

PO Box 500

Check if different
than previously
reported. (ACC)

Glens Falls

NY

12801

2. FEC IDENTIFICATION NUMBER ▼

C

C00547893

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NY

21

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

11 / 04 / 2014

in the
State of

NY

5. Covering Period

M M / D D / Y Y Y Y

10 / 16 / 2014

through

M M / D D / Y Y Y Y

11 / 24 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer James E. Morris

Signature of Treasurer

James E. Morris

[Electronically Filed]

Date

M M / D D / Y Y Y Y

01 / 23 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 173

Write or Type Committee Name

Elise for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	228258.45	1635265.01
(b) Total Contribution Refunds (from Line 20(d))	0.00	9370.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	228258.45	1625895.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	458821.56	1706993.90
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2958.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	458821.56	1704034.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	12756.18	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	89323.99	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

PAGE 3 / 173

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Elise for Congress

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		16		2014

To:

M M	/	D D	/	Y Y Y Y
11		24		2014

I. RECEIPTS
COLUMN A
Total this Period

COLUMN B
Election Cycle Total as of

COLUMN C
Total for

M M	/	D D	/	Y Y Y Y
11		04		2014

(date of general election)

M M	/	D D	/	Y Y Y Y
11		05		2014

(date after general election)

through

M M	/	D D	/	Y Y Y Y
11		24		2014

(last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
- (i) Itemized (use Schedule A)

97663.01

885813.60

275.00

(ii) Unitemized

16080.00

158368.71

175.00

(iii) Total of contributions from individuals

113743.01

1044182.31

450.00

(b) Political Party Committees

0.00

3250.00

--

(c) Other Political Committees

114515.44

560165.44

--

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 173

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	27667.26	
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
228258.45	1635265.01	450.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
28606.81	247760.82	
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	35000.00	
(b) All Other Loans		
0.00	0.00	
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	35000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	2958.91	
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
256865.26	1920984.74	450.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 173

Write or Type Committee Name

Elise for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y
10 / 16 / 2014

To:

M M / D D / Y Y Y Y
11 / 24 / 2014**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
458821.56	1706993.90	137314.66
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
35000.00	0.00	35000.00
(b) Of All Other Loans		
0.00	0.00	
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
35000.00	0.00	35000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	7370.00	
(b) Political Party Committees		
0.00	0.00	

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 173

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
---	---	--

(c) Other Political Committees (such as PACs)

0.00

2000.00

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00

9370.00

0.00

21. OTHER DISBURSEMENTS

4500.00

19000.00

1000.00

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

498321.56

1735363.90

173314.66

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

228258.45

1625895.01

450.00

IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

458821.56

1704034.99

V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

254212.48

256865.26

511077.74

498321.56

12756.18

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 173

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
JOYCE AAB

Mailing Address **1 WOODBURY PLACE**

City **ROCHESTER** State **NY** Zip Code **14618-3436**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4178

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KENNETH ABRAMOWITZ

Mailing Address **P.O. BOX 958**

City **SOUTHPORT** State **CT** Zip Code **06890-0958**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NGN CAPITAL** Occupation **ANALYST**

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11.4469

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KEVIN ACRES

Mailing Address **194 BRANDY BROOK RD.**

City **MADRID** State **NY** Zip Code **13660-3123**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **DAIRY PRODUCER**

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2014

Transaction ID : SA11.4431

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

RANDALL ADAMS

Mailing Address 330 W. 43RD ST.

City

NEW YORK

State

NY

Zip Code

10036-6427

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCHULTE ROTH & ZABEL

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

Transaction ID : SA11.4604

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AVA ASHENDORFF

Mailing Address 670 LONDON HILL

City

CHESTERTOWN

State

NY

Zip Code

12817-3216

FEC ID number of contributing
federal political committee.

C

Name of Employer

KEI QUALITY RESINS, INC

Occupation

OWNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4328

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN D. ASPLAND JR.

Mailing Address 15 LYNDON ROAD

City

QUEENSBURY

State

NY

Zip Code

12804-7716

FEC ID number of contributing
federal political committee.

C

Name of Employer

FITZGERALD MORRIS BAKER FIRTH

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4229

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

DONALD E. BABCOCK

Mailing Address 2603 ELM HILL PIKE SUITE P

City

NASHVILLE

State

TN

Zip Code

37214-3156

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4514

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JUDITH BALDWIN

Mailing Address 1130 PARK AVE.

City

NEW YORK

State

NY

Zip Code

10128-1255

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ENTREPRENEUR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

Transaction ID : SA11.4396

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EDWARD M. BARTHOLOMEW JR.

Mailing Address 14 DORSET PLACE

City

QUEENSBURY

State

NY

Zip Code

12804-1034

FEC ID number of contributing
federal political committee.

C

Name of Employer

ECONOMIC DEVELOPMENT CORPORATION

Occupation

ECONOMIC DEVELOPMENT DIRECTOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4567

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

DEAN BARTLETT

Mailing Address 177 HARTMAN RD

City

HUDSON FALLS

State

NY

Zip Code

12839-9409

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
ORTHODONTIST

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4440

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHARLES BARTON

Mailing Address 66 BROWNS PATH

City

QUEENSBURY

State

NY

Zip Code

12804-5825

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE BARTON GROUPOccupation
COO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2014

Transaction ID : SA11.4433

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JAY BERNHARDT

Mailing Address 4945 HARVEST LANE

City

LIVERPOOL

State

NY

Zip Code

13088-4717

FEC ID number of contributing
federal political committee.

C

Name of Employer
JGB ENT. INC.Occupation
OWNER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4445

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MATTHEW BETTE**A.**

Mailing Address 22 CENTURY HILL DR

City

LATHAM

State

NY

Zip Code

12110-2137

FEC ID number of contributing
federal political committee.

C

Name of Employer

BETTE & CRING, LLC

Occupation

CONSTRUCTION

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4501

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT BICKNELL**B.**

Mailing Address 6110B STATE HIGHWAY 56

City

POTSDAM

State

NY

Zip Code

13676-3002

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE BICKNELL CORPORATION

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2014

Transaction ID : SA11.4645

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GARY BLANK**C.**

Mailing Address 23 NELSON STREET

City

WINCHESTER

State

MA

Zip Code

01890-2123

FEC ID number of contributing
federal political committee.

C

Name of Employer

FIDELITY INVESTMENTS

Occupation

PUBLIC AFFAIRS

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4527

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2750.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

CHARLES F. BLEIBTREY JR.

A.

Mailing Address 315 MIDDLE RD

City

LAKE GEORGE

State

NY

Zip Code

12845-7417

FEC ID number of contributing
federal political committee.

C

Name of Employer
VERIZON RETIREDOccupation
REPAIRMAN

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4437

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BART BONNER

B.

Mailing Address 23967 COUNTY ROUTE 67

City

WATERTOWN

State

NY

Zip Code

13601-9359

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIELD KING DECOYSOccupation
SELF

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4216

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BART BONNER

C.

Mailing Address 23967 COUNTY ROUTE 67

City

WATERTOWN

State

NY

Zip Code

13601-9359

FEC ID number of contributing
federal political committee.

C

Name of Employer
FIELD KING DECOYSOccupation
SELF

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4564

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

RAY BROWN

A.

Mailing Address 5605 RHONDA RD

City

SYKESVILLE

State

MD

Zip Code

21784-9052

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOOZ ALLEN HAMILTON

Occupation

SOFTWARE ENGINEER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		08		2014

Transaction ID : SA11.4657

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT BRUNELL

B.

Mailing Address BRAND HOLLOW ROAD

City

PERU

State

NY

Zip Code

12972-

FEC ID number of contributing
federal political committee.

C

Name of Employer

NOEL J. BRUNELL & SON INC.

Occupation

OWNER - PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SA11.4530

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CHARLES BURMASTER

C.

Mailing Address 900 ROCK CITY RD #196

City

BALLSTON SPA

State

NY

Zip Code

12020-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer

WAL MART TRANSPORTATION

Occupation

DRIVER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4169

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

525.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
CHARLES BURMASTER

Mailing Address 900 ROCK CITY RD #196

City	State	Zip Code
BALLSTON SPA	NY	12020-2923

FEC ID number of contributing federal political committee.

C

Name of Employer
WAL MART TRANSPORTATION

Occupation
DRIVER

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		16		2014

Transaction ID : SA11.4709

Amount of Each Receipt this Period

25.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JUDY CALOGERO

Mailing Address 11 LAWTON AVENUE
18 DIVISION ST ROOM 304

City	State	Zip Code
SARATOGA SPRINGS	NY	12866-3144

FEC ID number of contributing federal political committee.

C

Name of Employer
CALOGERO PARTNERS LLC

Occupation
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4438

Amount of Each Receipt this Period

200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PRESTON C. CARLISLE

Mailing Address 92 COUNTY ROUTE 28

City	State	Zip Code
OGDENSBURG	NY	13669-4456

FEC ID number of contributing federal political committee.

C

Name of Employer
CARLISLE LAW FIRM P.C.

Occupation
ATTORNEY

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4447

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1225.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. **RUSSELL L. CARSON**

Mailing Address 930 FIFTH AVE

City

NEW YORK

State

NY

Zip Code

10021-2651

FEC ID number of contributing
federal political committee.

C

Name of Employer

WELSH CARSON

Occupation

PRIVATE EQUITY

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4449

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. **RODNEY W. CORNELIUS**

Mailing Address PO BOX 752

City

LAKE GEORGE

State

NY

Zip Code

12845-0752

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SA11.4271

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. **WILLIAM COUCH**

Mailing Address 34866 FRENCH CREEK ROAD

City

CLAYTON

State

NY

Zip Code

13624-2274

FEC ID number of contributing
federal political committee.

C

Name of Employer

UBS FINANCIAL SERVICES

Occupation

WEALTH MANAGEMENT ADVISOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SA11.4280

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3850.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

CAROL N. CROSSED**A.**

Mailing Address 1675 CLOVER STREET

City

ROCHESTER

State

NY

Zip Code

14618-2517

FEC ID number of contributing
federal political committee.

C

Name of Employer

SUSAN B ANTHONY BIRTHPLACE MUSEUM

Occupation

OWNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11.4409

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KATHLEEN CROSS**B.**

Mailing Address 6110 BURGOYNE RD

City

HOUSTON

State

TX

Zip Code

77057-3510

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

Transaction ID : SA11.4586

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HARLAN R. CROW**C.**

Mailing Address 3819 MAPLE AVE

City

DALLAS

State

TX

Zip Code

75219-3913

FEC ID number of contributing
federal political committee.

C

Name of Employer

CROW HOLDINGS

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4619

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

3350.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

HOWARD D. CROW

A.

Mailing Address 38199 MAPLE AVE

City

DALLAS

State

TX

Zip Code

75219-

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4626

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KATHERINE RAYMOND CROW

B.

Mailing Address 4700 PRESTON ROAD

City

DALLAS

State

TX

Zip Code

75205-3712

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4627

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

CLARK CURRIER

C.

Mailing Address 1049 HARDSCRABBLE ROAD

City

CADYVILLE

State

NY

Zip Code

12918-1906

FEC ID number of contributing
federal political committee.

C

Name of Employer

TWINSTATE

Occupation

EXECUTIVE.

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4669

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

DENNIS D. CURTIN

A.

Mailing Address 22 SPIT FIRE DRIVE

City

PLATTSBURGH

State

NY

Zip Code

12901-8521

FEC ID number of contributing
federal political committee.

C

Name of Employer

WHITEMAN OSTERMAN & HANNA

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4237

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LISA DACOSTA

B.

Mailing Address P.O. BOX 4609

City

JACKSON

State

WY

Zip Code

83001-4609

FEC ID number of contributing
federal political committee.

C

Name of Employer

CACHE CREEK FINANCIAL, LLC

Occupation

CONSULTANT

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

Transaction ID : SA11.4287

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEONARD J. DARIANO

C.

Mailing Address 4092 LAKE SHORE DR

City

DIAMOND POINT

State

NY

Zip Code

12824-1702

FEC ID number of contributing
federal political committee.

C

Name of Employer

METRO FORD SALES

Occupation

AUTO DEALER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4230

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

ROSEMARY DEMICK

A.

Mailing Address 66 S MAIN ST

City

HAMMOND

State

NY

Zip Code

13646-3201

FEC ID number of contributing
federal political committee.

C

Name of Employer

YESTER YEARS VINTAGE DOORS

Occupation

SELF EMPLOYED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4663

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM DEMIS

B.

Mailing Address 8627 GLASCOCK LANE

City

HOUSTON

State

TX

Zip Code

77064-7093

FEC ID number of contributing
federal political committee.

C

Name of Employer

SOUTHWESTERN ENERGY

Occupation

GEOLOGIST

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4494

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DANIEL G. DEVOS

C.

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer

DP FOX VENTURES

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4297

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 20 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

DOUGLAS L. DEVOS

A.

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALTICOR

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4300

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

ELISABETH DEVOS

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer

WINDQUEST GROUP

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4296

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

HELEN J. DEVOS

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4294

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MARIA P. DEVOS**A.**

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4301

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAMELLA G. DEVOS**B.**

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4298

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RICHARD DEVOS JR.**C.**

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer

WINDQUEST GROUP

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4295

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

RICHARD M. DEVOS SR.**A.**

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer
RDV CORPOccupation
CHAIRMAN

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4293

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SUZANNE CHERYL DEVOS**B.**

Mailing Address 126 OTTAWA AVE NW SUITE 500

City

GRAND RAPIDS

State

MI

Zip Code

49503-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer
RDV CORPOccupation
DIRECTOR

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4299

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

KENNETH M. DUBERSTEIN**C.**

Mailing Address 2100 PENNSYLVANIA AVE NW STE 500

City

WASHINGTON

State

DC

Zip Code

20037-3204

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE DUBERSTEIN GROUP INCOccupation
CHAIRMAN / CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2014

Transaction ID : SA11.4279

Amount of Each Receipt this Period

600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

2600.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

KATHIE DUNCAN

A.

Mailing Address 27 SUGAR PINE RD.

City

QUEENSBURY

State

NY

Zip Code

12804-1245

FEC ID number of contributing
federal political committee.

C

Name of Employer

ADIRONDACK TRUST COMPANY

Occupation

BANKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

430.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11.4465

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANTHONY M. DURANTE

B.

Mailing Address 1017 WOODFIELD DR

City

NISKAYUNA

State

NY

Zip Code

12309-1645

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAPITAL LIVING AND REHAB CENTER

Occupation

CFO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4242

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

THOMAS ELIOPOULOS II

C.

Mailing Address 345 SOUTH CAMDEN DRIVE

City

BEVERLY HILLS

State

CA

Zip Code

90212-4202

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN HEALTH CONNECTION

Occupation

SALES EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SA11.4377

Amount of Each Receipt this Period

100.01

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.01

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MICHAEL FALCONE

A.

Mailing Address 333 WEST WASHINGTON ST SUITE 600

City

SYRACUSE

State

NY

Zip Code

13202-9203

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE PIONEER COMPANIES

Occupation

CHAIRMAN

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4219

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DONALD FANGBONER

B.

Mailing Address 74 AMHERST STREET

City

LAKE GEORGE

State

NY

Zip Code

12845-1215

FEC ID number of contributing
federal political committee.

C

Name of Employer

LAKE GEORGE MUSEUM

Occupation

DIRECTOR

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4519

Amount of Each Receipt this Period

800.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ELIZABETH FRAZEE

C.

Mailing Address 6313 EVERMAY DR

City

MC LEAN

State

VA

Zip Code

22101-2309

FEC ID number of contributing
federal political committee.

C

Name of Employer

TWINLOGIC STRATEGIES

Occupation

CONSULTANT/ATTORNEY

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

Transaction ID : SA11.4401

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)
GILBERT J. GAGNON

Mailing Address **130 ASH STREET**

City State Zip Code
SARATOGA SPRINGS NY 12866-3906

FEC ID number of contributing
federal political committee.

C

Name of Employer
SOUTHWORTH MILTON INC

Occupation
OWNER

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

10 / 16 / 2014

Transaction ID : SA11.4244

Amount of Each Receipt this Period

750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
LINDA LEE GILLILLAND

Mailing Address **444 MOUNTAIN VIEW DRIVE**

City State Zip Code
WILLSBORO NY 12996-3511

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOWN OF WILLSBORO

Occupation
TOWN SUPERVISOR

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11.4508

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
BLAKE GOTTESMAN

Mailing Address **588 TREMONT ST**

City State Zip Code
BOSTON MA 02118-1603

FEC ID number of contributing
federal political committee.

C

Name of Employer
BERKSHIRE PARTNERS LLC

Occupation
INVESTMENT MANAGEMENT

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

10 / 29 / 2014

Transaction ID : SA11.4477

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1950.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MICHAEL J. GRASSO**A.**

Mailing Address 23 RAPAPORT DR

City

LAKE GEORGE

State

NY

Zip Code

12845-5137

FEC ID number of contributing
federal political committee.

C

Name of Employer

COOL INSURING AGENCY

Occupation

INSURANCE AGENT

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4227

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ERIC N. GREGWARE**B.**

Mailing Address 14979 VALLEY DRIVE

City

CLAYTON

State

NY

Zip Code

13624-3155

FEC ID number of contributing
federal political committee.

C

Name of Employer

IPREO

Occupation

DIRECTOR OF RESEARCH SALES

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2014

Transaction ID : SA11.4282

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EMMA L. GRIFFEN**C.**

Mailing Address 51 NORTH MILTON RD

City

SARATOGA SPRINGS

State

NY

Zip Code

12866-6137

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4245

Amount of Each Receipt this Period

750.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

1100.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

STEPHEN C. GRIFFEN

Mailing Address 51 N MILTON ROAD

City

SARATOGA SPRINGS

State

NY

Zip Code

12866-6137

FEC ID number of contributing
federal political committee.

C

Name of Employer

PALETTE STONE

Occupation

VP OPERATIONS

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4218

Amount of Each Receipt this Period

750.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

WILLIAM V HASTINGS

Mailing Address 1296 STONY CREEK ROAD

City

HADLEY

State

NY

Zip Code

12835-2318

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

Transaction ID : SA11.4283

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN HENDRICKSON

Mailing Address 40 GEYSER ROAD

City

SARATOGA SPRINGS

State

NY

Zip Code

12866-9002

FEC ID number of contributing
federal political committee.

C

Name of Employer

WHITNEY INDUSTRIES

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4307

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. CLAIRE A. HENSLER

Mailing Address 125 MANNIS RD

City

QUEENSBURY

State

NY

Zip Code

12804-1365

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4577

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. WAYNE A. JOHNSTON

Mailing Address 110 ELM STREET

City

LAKE PLACID

State

NY

Zip Code

12946-1368

FEC ID number of contributing
federal political committee.

C

Name of Employer

RUTHIE'S RUN

Occupation

OWNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4503

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. THOMAS JOHN JORDAN

Mailing Address 1474 ALEXANDER VALLEY ROAD

City

HEALDSBURG

State

CA

Zip Code

95448-9003

FEC ID number of contributing
federal political committee.

C

Name of Employer

JORDAN WINERY

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4446

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

DAWN W. JUDKINS

Mailing Address 286 BUTLER POND ROAD

City

QUEENSBURY

State

NY

Zip Code

12804-8228

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4576

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JASON JURGENS

Mailing Address 30 WEST 63RD STREET, #6J

City

NEW YORK

State

NY

Zip Code

10023-7109

FEC ID number of contributing
federal political committee.

C

Name of Employer

JONES DAY

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SA11.4585

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN KACHICHIAN

Mailing Address 250 EAST 30TH STREET

City

NEW YORK

State

NY

Zip Code

10016-8295

FEC ID number of contributing
federal political committee.

C

Name of Employer

OCH-ZIFF CAPITAL MANAGEMENT

Occupation

PORTFOLIO FINANCE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

Transaction ID : SA11.4268

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GENA KATZ

Mailing Address 580 W. HAWTHORNE PLACE

City

CHICAGO

State

IL

Zip Code

60657-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

WRITER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2014

Transaction ID : SA11.4386

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

TRAVIS R. KAVULLA

Mailing Address 8073 US HWY 89

City

GREAT FALLS

State

MT

Zip Code

59405-8054

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4240

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BARBARA KERR

Mailing Address 220 STONE CHURCH ROAD

City

BALLSTON SPA

State

NY

Zip Code

12020-4604

FEC ID number of contributing
federal political committee.

C

Name of Employer

SKIDMORE COLLEGE

Occupation

CARD OFFICE COORDINATOR

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

369.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

Transaction ID : SA11.4359

Amount of Each Receipt this Period

14.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

764.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

GARY KILLIAN

A.

Mailing Address 42 FOREST AVE

City

RYE

State

NY

Zip Code

10580-4210

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

Transaction ID : SA11.4399

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JULIA P. KILLIAN

B.

Mailing Address 42 FOREST AVE.

City

RYE

State

NY

Zip Code

10580-4210

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

Transaction ID : SA11.4398

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SCOTT KINGSLEY

C.

Mailing Address 105 TRAVER RD, APT. 8

City

GANSEVOORT

State

NY

Zip Code

12831-1349

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4316

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2050.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 32 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. SETH A. KLARMAN

Mailing Address 329 HEATH STREET

City

CHESTNUT HILL

State

MA

Zip Code

02467-2820

FEC ID number of contributing
federal political committee.

C

Name of Employer

BAUPOST GROUP

Occupation

FOUNDER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11.4405

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. ANTON F. KREUZER

Mailing Address P.O. BOX 230 6143 STATE RT. 30

City

LAKE CLEAR

State

NY

Zip Code

12945-0230

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

SELF

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

Transaction ID : SA11.4593

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. LAUREN KULEY

Mailing Address 120 E. FREEDOM WAY UNIT 535

City

CINCINNATI

State

OH

Zip Code

45202-3482

FEC ID number of contributing
federal political committee.

C

Name of Employer

SQUIRE PATTON BOGGS

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2014

Transaction ID : SA11.4651

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2950.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 33 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

ROGER LAPIERRE

Mailing Address 73 PARK STREET

City

GOUVERNEUR

State

NY

Zip Code

13642-1019

FEC ID number of contributing
federal political committee.

C

Name of Employer
RSI ROOFING INC.Occupation
CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4497

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

LEONARD A. LAUDER

Mailing Address 767 FIFTH AVE

City

NEW YORK

State

NY

Zip Code

10153-0023

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE ESTEE LAUDER COMPANIESOccupation
CHARIMAN EMERITUS

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4450

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

RONALD S. LAUDER

Mailing Address 767 FIFTH AVE SUITE 4200

City

NEW YORK

State

NY

Zip Code

10153-0023

FEC ID number of contributing
federal political committee.

C

Name of Employer
RSL MANAGEMENT INCOccupation
SELF-EMPLOYED

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4305

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

ALBERT F. LAWRENCE

Mailing Address 137 S GREENFIELD RD.

City

GREENFIELD CENTER

State

NY

Zip Code

12833-1314

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAWYER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4223

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN J. LAYDEN

Mailing Address 3331 E MALLORY BLVD

City

JUPITER

State

FL

Zip Code

33458-8785

FEC ID number of contributing
federal political committee.

C

Name of Employer

ADIRONDACK CARDIOLOGY

Occupation

CARDIOLOGIST

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4579

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOHN P. LEARY

Mailing Address 26 MACORY WAY

City

GANSEVOORT

State

NY

Zip Code

12831-1157

FEC ID number of contributing
federal political committee.

C

Name of Employer

WARREN ANESTHESIOLOGISTS

Occupation

ANESTHESIOLOGIST

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4571

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

525.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
DAVID LEINWAND

Mailing Address 174 WASHINGTON ST.

City State Zip Code
JERSEY CITY NJ 07302-4598

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLEARY GOTTLIEBOccupation
ATTORNEY

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		22		2014

Transaction ID : SA11.4382

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANNE M. LEWIS

Mailing Address 1607 16TH ST NW APT 2

City State Zip Code
WASHINGTON DC 20009-3005

FEC ID number of contributing
federal political committee.

C

Name of Employer
FACEBOOKOccupation
CLIENT PARTNER

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SA11.4461

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KHOONMIN LIM

Mailing Address 983 PARK AVENUE, PHA

City State Zip Code
NEW YORK NY 10028-0808

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
INVESTOR

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SA11.4600

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 36 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

ADELE MALPASS

A.

Mailing Address 275 CENTRAL PARK WEST
9B

City	State	Zip Code
NEW YORK	NY	10024-3015

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENCIMA GLOBALOccupation
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

Transaction ID : SA11.4397

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PATRICK R. MARTONE

B.

Mailing Address 3 STARTING GATE CT

City	State	Zip Code
SARATOGA SPRINGS	NY	12866-7340

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITAL LIVING NURSING AND REHAB CENOccupation
HEALTHCARE ADMIN.

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4224

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SHAY S. MASON

C.

Mailing Address 14 LANTERN HILL RD

City	State	Zip Code
QUEENSBURY	NY	12804-8056

FEC ID number of contributing
federal political committee.

C

Name of Employer
GLENS FALLS SYMPHONYOccupation
EXECUTIVE DIRECTOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4570

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

HENRY MILLER

A.

Mailing Address 85 ROUND HILL ROAD

City

GREENWICH

State

CT

Zip Code

06831-3722

FEC ID number of contributing
federal political committee.

C

Name of Employer

MARBLEGATE ASSET MANAGEMENT

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

Transaction ID : SA11.4369

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DEBORAH ANNE V. MORRIS

B.

Mailing Address 146 MCDougall Rd.

City

ARGYLE

State

NY

Zip Code

12809-3435

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCA AMERICAS

Occupation

BUSINESS DEVELOPMENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2014

Transaction ID : SA11.4358

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DEBORAH ANNE V. MORRIS

C.

Mailing Address 146 MCDougall Rd.

City

ARGYLE

State

NY

Zip Code

12809-3435

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCA AMERICAS

Occupation

BUSINESS DEVELOPMENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

685.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11.4472

Amount of Each Receipt this Period

35.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2685.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 38 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

ERIC MOWER

Mailing Address 211 WEST JEFFERSON STREET

City

SYRACUSE

State

NY

Zip Code

13202-2455

FEC ID number of contributing
federal political committee.

C

Name of Employer

ERIC MOWER + ASSOCIATES

Occupation

BUSINESS EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2014

Transaction ID : SA11.4400

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

H. NICHOLAS MULLER III

Mailing Address PO BOX 244

City

ESSEX

State

NY

Zip Code

12936-0244

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4566

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEPHENS M. MUNDY

Mailing Address 42 SPITFIRE DRIVE

City

PLATTSBURGH

State

NY

Zip Code

12901-8521

FEC ID number of contributing
federal political committee.

C

Name of Employer

CPI/CVPH MEDICAL CENTER

Occupation

CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4482

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3800.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 39 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial) JUSTIN MUZINICH			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>02</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	11		02		2014
M M M	/	D D D	/	Y Y Y Y Y										
11		02		2014										
Mailing Address 125 EAST 63RD STREET			Transaction ID : SA11.4609											
City NEW YORK	State NY	Zip Code 10065-7302	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>							1000.00				
					1000.00									
FEC ID number of contributing federal political committee. C			CONTRIBUTION											
Name of Employer MUZINICH & CO		Occupation FINANCE												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>								1000.00				
					1000.00									

B. Full Name (Last, First, Middle Initial) SUSAN NEELY			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	10		19		2014
M M M	/	D D D	/	Y Y Y Y Y										
10		19		2014										
Mailing Address 7715 CURTIS STREET			Transaction ID : SA11.4289											
City CHEVY CHASE	State MD	Zip Code 20815-4913	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>							500.00				
					500.00									
FEC ID number of contributing federal political committee. C			CONTRIBUTION											
Name of Employer AMERICAN BEVERAGE ASSOC		Occupation TRADE ASSOCIATION EXEC												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>								500.00				
					500.00									

C. Full Name (Last, First, Middle Initial) MORGAN D. ORTAGUS			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>23</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	10		23		2014
M M M	/	D D D	/	Y Y Y Y Y										
10		23		2014										
Mailing Address 301 E 66TH STREET APT 6G			Transaction ID : SA11.4389											
City NEW YORK	State NY	Zip Code 10065-6215	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>25.00</td> </tr> </table>							25.00				
					25.00									
FEC ID number of contributing federal political committee. C			CONTRIBUTION											
Name of Employer STANDARD CHARTERED BANK		Occupation DIRECTOR												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>275.00</td> </tr> </table>								275.00				
					275.00									

SUBTOTAL of Receipts This Page (optional).....			<table border="1"> <tr> <td colspan="5"></td> <td>1525.00</td> </tr> </table>							1525.00
					1525.00					
TOTAL This Period (last page this line number only).....			<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>							

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 40 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

PETER S. PAINE JR.

Mailing Address 135 RIVER LANE

City

WILLSBORO

State

NY

Zip Code

12996-3940

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHAMPAIN NATIONAL BANK

Occupation

CHAIRMAN

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4479

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

FRANK J. PARILLO

Mailing Address 215 BALLARD ROAD

City

WILTON

State

NY

Zip Code

12831-1356

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

SELF

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4670

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PAUL PELAGALLI

Mailing Address 20 PROSPECT ST

City

BALLSTON SPA

State

NY

Zip Code

12020-1367

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ATTORNEY

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4510

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 41 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

BRIAN S. PETROVEK

A.

Mailing Address ONE CIVIC CENTER PLAZA

City

GLENS FALLS

State

NY

Zip Code

12801-4532

FEC ID number of contributing
federal political committee.

C

Name of Employer

ADIRONDACK FLAMES

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4515

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

GREGORY PINTO

B.

Mailing Address 414 MAPLE AVENUE

City

SARATOGA SPRINGS

State

NY

Zip Code

12866-5550

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

PHYSICIAN

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4569

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEPHEN PODD

C.

Mailing Address 188 LAKE STREET

City

ROUSES POINT

State

NY

Zip Code

12979-1426

FEC ID number of contributing
federal political committee.

C

Name of Employer

POWERTEX INC.

Occupation

PRESIDENT & CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4308

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2400.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 42 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

VICTOR PODD

A.

Mailing Address 24 COLLIGAN POINT ROAD

City

PLATTSBURGH

State

NY

Zip Code

12901-7112

FEC ID number of contributing
federal political committee.

C

Name of Employer

POWERTEX INC.

Occupation

VICE PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2014

Transaction ID : SA11.4384

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MARK PURCELL

B.

Mailing Address 566 COFFEEN ST

City

WATERTOWN

State

NY

Zip Code

13601-2685

FEC ID number of contributing
federal political committee.

C

Name of Employer

PURCELL CONSTRUCTION

Occupation

BUILDER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		22		2014

Transaction ID : SA11.4383

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

JOE RACCUIA

C.

Mailing Address 64 HEARTHSTONE DRIVE

City

WILTON

State

NY

Zip Code

12831-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer

MORCON TISSUE

Occupation

OWNER/PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4434

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 43 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

CHANDLER RALPH

Mailing Address 66 RIVER ROAD

City

LAKE PLACID

State

NY

Zip Code

12946-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer
ADIRONDACK HEALTHOccupation
CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4506

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DR. WILLIAM REYNOLDS

Mailing Address 32 OAKWOOD DRIVE

City

QUEENSBURY

State

NY

Zip Code

12804-1328

FEC ID number of contributing
federal political committee.

C

Name of Employer
ADIRONDACK RADIOLOGYOccupation
MEDICAL DOCTOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4568

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MICHAEL RING

Mailing Address 12485 CO. RT. 66

City

ADAMS CENTER

State

NY

Zip Code

13606-

FEC ID number of contributing
federal political committee.

C

Name of Employer
STEPHENS MEDIAOccupation
ENGINEER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

489.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4314

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 44 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

RICHARD L. SCHMIDT

Mailing Address 201 PLAZA REAL SUITE 140

City

BOCA RATON

State

FL

Zip Code

33432-3959

FEC ID number of contributing
federal political committee.

C

Name of Employer
SCHMIDT COMPANIESOccupation
OWNER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

Transaction ID : SA11.4421

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MATTHEW J. SIMPSON

Mailing Address PO BOX 324

City

BRANT LAKE

State

NY

Zip Code

12815-0324

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOWN OF HORICONOccupation
SUPERVISOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4322

Amount of Each Receipt this Period

75.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROBERT J. SLACK

Mailing Address 48 DINEEN RD

City

LAKE GEORGE

State

NY

Zip Code

12845-4517

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRESIDENT/COOOccupation
SCI COURIER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4209

Amount of Each Receipt this Period

25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 45 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial) JEREMY SMITH		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 954 LEXINGTON AVE		Transaction ID : SA11.4601
City NEW YORK	State NY	Zip Code 10021-5055
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF	Occupation ACTOR	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) FREDA P. SOLOMON		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 23 NORTH ROAD		Transaction ID : SA11.4313
City QUEENSBURY	State NY	Zip Code 12804-2034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer DAVIES & ASSOCIATES REAL ESTATE, LLC	Occupation REALTOR	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) MARGARET SPELLINGS		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 3347 BLACKBURN ST APT 10209		Transaction ID : SA11.4617
City DALLAS	State TX	Zip Code 75204-1565
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer GEORGE W. BUSH FOUNDATION	Occupation PRESIDENT	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 46 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MARGARET C. SPIEGEL**A.**

Mailing Address 154 BLUFF POINT DRIVE

City

PLATTSBURGH

State

NY

Zip Code

12901-5631

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4583

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BRIAN STAPLES**B.**

Mailing Address 25 FAMER STREET

City

CANTON

State

NY

Zip Code

13617-1120

FEC ID number of contributing
federal political committee.

C

Name of Employer

ST. LAWRENCE UNIVERSITY

Occupation

PROFESSOR

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4318

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ROY M. STEFANIK**C.**

Mailing Address 5675 STONE ROAD #320

City

CENTREVILLE

State

VA

Zip Code

20120-1667

FEC ID number of contributing
federal political committee.

C

Name of Employer

FAIRFAX MENTAL HEALTH

Occupation

PHYSICIAN

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2014

Transaction ID : SA11.4581

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 47 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MR. JUSTIN EUGENE STOKES

Mailing Address 1593 LUCKNOW RD

City

CAMDEN

State

SC

Zip Code

29020-8347

FEC ID number of contributing federal political committee.

C

Name of Employer

REP. RICHARD HANNA

Occupation

CHIEF OF STAFF

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		16		2014

Transaction ID : SA11.4258

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JUSTIN EUGENE STOKES

Mailing Address 1593 LUCKNOW RD

City

CAMDEN

State

SC

Zip Code

29020-8347

FEC ID number of contributing federal political committee.

C

Name of Employer

REP. RICHARD HANNA

Occupation

CHIEF OF STAFF

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2014

Transaction ID : SA11.4603

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

STEPHEN F. SULLIVAN

Mailing Address 56 CONDON RD

City

STILLWATER

State

NY

Zip Code

12170-1914

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

HOSPITALITY

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		16		2014

Transaction ID : SA11.4232

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

625.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 48 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

DONALD SUMMERS

Mailing Address 801 FRONTAGE ROAD #203

City

OXFORD

State

MS

Zip Code

38655-5124

FEC ID number of contributing federal political committee.

C

Name of Employer

UNIVERSITY OF MISSISSIPPI

Occupation

PROFESSOR

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4255

Amount of Each Receipt this Period

700.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MATTHEW SWIFT

Mailing Address 502 PARK AVENUE

City

NEW YORK

State

NY

Zip Code

10022-1108

FEC ID number of contributing federal political committee.

C

Name of Employer

CONCORD 51

Occupation

CHAIRMAN

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		28		2014

Transaction ID : SA11.4457

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

F MICHAEL TUCKER

Mailing Address 115 HUNTERSFIELD ROAD

City

DELMAR

State

NY

Zip Code

12054-3827

FEC ID number of contributing federal political committee.

C

Name of Employer

CEG

Occupation

PRESIDENT & CEO

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4436

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 49 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

THOMAS TYLER

A.

Mailing Address 234 CASEY ROAD

City

SCHUYLERVILLE

State

NY

Zip Code

12871-1816

FEC ID number of contributing
federal political committee.

C

Name of Employer

NYS

Occupation

MANAGER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1574.00

Date of Receipt

M M / D D / Y Y Y Y
10 16 2014

Transaction ID : SA11.4173

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

THOMAS TYLER

B.

Mailing Address 234 CASEY ROAD

City

SCHUYLERVILLE

State

NY

Zip Code

12871-1816

FEC ID number of contributing
federal political committee.

C

Name of Employer

NYS

Occupation

MANAGER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1574.00

Date of Receipt

M M / D D / Y Y Y Y
10 21 2014

Transaction ID : SA11.4362

Amount of Each Receipt this Period

114.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

THOMAS TYLER

C.

Mailing Address 234 CASEY ROAD

City

SCHUYLERVILLE

State

NY

Zip Code

12871-1816

FEC ID number of contributing
federal political committee.

C

Name of Employer

NYS

Occupation

MANAGER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1574.00

Date of Receipt

M M / D D / Y Y Y Y
10 29 2014

Transaction ID : SA11.4474

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

239.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 50 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

THOMAS TYLER

A.

Mailing Address 234 CASEY ROAD

City

SCHUYLERVILLE

State

NY

Zip Code

12871-1816

FEC ID number of contributing
federal political committee.

C

Name of Employer

NYS

Occupation

MANAGER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1574.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4662

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

THEODORE J. VAN DER MEID

B.

Mailing Address 2914 N 1ST RD

City

ARLINGTON

State

VA

Zip Code

22201-1012

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Transaction ID : SA11.4407

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BROOKS WASHINGTON

C.

Mailing Address 10724 WILSHIRE BLVD, APT 1402

City

LOS ANGELES

State

CA

Zip Code

90024-4473

FEC ID number of contributing
federal political committee.

C

Name of Employer

ROHA VENTURES

Occupation

ENTREPRENEUR

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4493

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 51 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

HARRY WILSON

A.

Mailing Address 42 SAGE TERRACE

City

SCARSDALE

State

NY

Zip Code

10583-2050

FEC ID number of contributing
federal political committee.

C

Name of Employer
MAEVA GROUP, LLCOccupation
TURNAROUND EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4613

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ETHAN WINGFIELD

B.

Mailing Address 73 E LAKE ST

City

CHICAGO

State

IL

Zip Code

60601-4804

FEC ID number of contributing
federal political committee.

C

Name of Employer
CAPITAL ONE FINANCIAL CORPOccupation
STRATEGY EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4615

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DAWN ZARRILLO

C.

Mailing Address 1700 DUANESBURG ROAD

City

DUANESBURG

State

NY

Zip Code

12056-4310

FEC ID number of contributing
federal political committee.

C

Name of Employer
ZARRILLO'S CUSTOM DESIGN KITCHENSOccupation
CABINET SHOP

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SA11.4560

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 52 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
DMN MANAGEMENT SERVICES LLC

Mailing Address 26 NORTH BROADWAY

City	State	Zip Code
SCHENECTADY	NY	12305-1932

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4228

Amount of Each Receipt this Period

500.00

PARTNERSHIP CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ANTHONY M. DURANTE

Mailing Address 1017 WOODFIELD DR

City	State	Zip Code
NISKAYUNA	NY	12309-1645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CAPITAL LIVING AND REHAB CENTER

CFO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4252

Amount of Each Receipt this Period

125.00

CONTRIBUTION

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
PATRICK R. MARTONE

Mailing Address 3 STARTING GATE CT

City	State	Zip Code
SARATOGA SPRINGS	NY	12866-7340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

CAPITAL LIVING NURSING AND REHAB CEN

HEALTHCARE ADMIN.

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4251

Amount of Each Receipt this Period

125.00

CONTRIBUTION

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 53 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

JODI POLSINELLI

Mailing Address 26 NORTH BROADWAY

City

SCHENECTADY

State

NY

Zip Code

12305-1932

FEC ID number of contributing
federal political committee.

C

Name of Employer

DMN MANAGEMENT SERVICES LLC

Occupation

PARTNER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4253

Amount of Each Receipt this Period

125.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

JAMI ROGOWSKI

Mailing Address 26 NORTH BROADWAY

City

SCHENECTADY

State

NY

Zip Code

12305-1932

FEC ID number of contributing
federal political committee.

C

Name of Employer

DMN MANAGEMENT SERVICES LLC

Occupation

PARTNER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

125.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

Transaction ID : SA11.4254

Amount of Each Receipt this Period

125.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

RICCELLI ENTERPRISES LLC

Mailing Address PO BOX 6418

City

SYRACUSE

State

NY

Zip Code

13217-6418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SA11.4284

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 54 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)
JOSEPH RICCELLI

Mailing Address **PO BOX 6418**

City	State	Zip Code
SYRACUSE	NY	13217-6418

FEC ID number of contributing federal political committee.

C

Name of Employer
RICELLI ENTERPRISES LLC

Occupation
PARTNER

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

10 / **17** / **2014**

Transaction ID : **SA11.4285**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
RICHARD RICCELLI SR.

Mailing Address **PO BOX 6418**

City	State	Zip Code
SYRACUSE	NY	13217-6418

FEC ID number of contributing federal political committee.

C

Name of Employer
RICELLI ENTERPRISES LLC

Occupation
PARTNER

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

10 / **17** / **2014**

Transaction ID : **SA11.4286**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
WILEY REIN LLP

Mailing Address **1776 K STREET NW**

City	State	Zip Code
WASHINGTON	DC	20006-2304

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

11 / **04** / **2014**

Transaction ID : **SA11.4690**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 55 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MIKE SENKOWSKI

A.

Mailing Address 1776 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20006-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer

WILEY REIN LLP

Occupation

PARTNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

50.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2014

Transaction ID : SA11.4705

Amount of Each Receipt this Period

50.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

TODD STANSBURY

B.

Mailing Address 1776 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20006-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer

WILEY REIN LLP

Occupation

PARTNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2014

Transaction ID : SA11.4706

Amount of Each Receipt this Period

250.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

NANCY VICTORY

C.

Mailing Address 1776 K STREET NW

City

WASHINGTON

State

DC

Zip Code

20006-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer

WILEY REIN LLP

Occupation

PARTNER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2014

Transaction ID : SA11.4707

Amount of Each Receipt this Period

200.00

CONTRIBUTION

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 56 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

CLUB FOR GROWTH PAC

Mailing Address 2001 L STREET NW SUITE 600

City

WASHINGTON

State

DC

Zip Code

20036-4967

FEC ID number of contributing
federal political committee.**C** C00432260

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : SA11.4572

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)

PAUL C. LEACH

Mailing Address PO BOX 1510

City

GLEN ELLEN

State

CA

Zip Code

95442-1510

FEC ID number of contributing
federal political committee.**C**

Name of Employer

PAUL LEACH & COMPANY

Occupation

PRIVATE INVESTMENT BANKING

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		22		2014

Transaction ID : SA11.4580

Amount of Each Receipt this Period

250.00

CONTRIBUTION

EARMARKED FROM CLUB FOR GROWTH PAC

Full Name (Last, First, Middle Initial)

SBA LIST CANDIDATE FUND

Mailing Address 1707 L STREET NW, STE 550

City

WASHINGTON

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.**C** C00332296

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

13169.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		16		2014

Transaction ID : SA11.4221

Amount of Each Receipt this Period

260.00

[MEMO ITEM]

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....

250.00

TOTAL This Period (last page this line number only).....

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11.4572

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT EFFECTED.

Form/Schedule: SA11AI
Transaction ID: SA11.4221

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT EFFECTED.

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 58 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

CHRIS SLATTERY

Mailing Address 61 LEWIS PARKWAY

City

YONKERS

State

NY

Zip Code

10705-2525

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE EVERGREEN ASSOCIATION INC

Occupation

MANAGER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		02		2014

Transaction ID : SA11.4249

Amount of Each Receipt this Period

250.00

CONTRIBUTION

EARMARKED FROM SBA LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial)

SBA LIST CANDIDATE FUND

Mailing Address 1707 L STREET NW, STE 550

City

WASHINGTON

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.

C C00332296

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

13169.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2014

Transaction ID : SA11.4417

Amount of Each Receipt this Period

2000.00

[MEMO ITEM]
SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)

ELLEN BARROSSE

Mailing Address 551 HORSESHOE HILL RD

City

HOCKESSIN

State

DE

Zip Code

19707-9360

FEC ID number of contributing
federal political committee.

C

Name of Employer

SYNCHROGENIX

Occupation

FOUNDER/CEO

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2014

Transaction ID : SA11.4424

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

EARMARKED FROM SBA LIST CANDIDATE FUND

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11.4417

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT EFFECTED.

Form/Schedule:
Transaction ID:

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 60 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

FELIX CONRY**A.**

Mailing Address 150 STROUD AVE

City

STATEN ISLAND

State

NY

Zip Code

10312-3244

FEC ID number of contributing
federal political committee.**C**

Name of Employer

N/A

Occupation

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2014

Transaction ID : SA11.4425

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

EARMARKED FROM SBA LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial)

SBA LIST CANDIDATE FUND**B.**

Mailing Address 1707 L STREET NW, STE 550

City

WASHINGTON

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.**C**

C00332296

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

13169.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		24		2014

Transaction ID : SA11.4426

Amount of Each Receipt this Period

25.00

[MEMO ITEM]

SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)

SBA LIST CANDIDATE FUND**C.**

Mailing Address 1707 L STREET NW, STE 550

City

WASHINGTON

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.**C**

C00332296

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

13169.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : SA11.4535

Amount of Each Receipt this Period

476.00

[MEMO ITEM]

SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID : SA11.4426

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT EFFECTED.

Form/Schedule: SA11AI

Transaction ID: SA11.4535

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT EFFECTED.

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 62 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

BAKER SMITH

Mailing Address 3360 E TERRELL BRANCH COURT SOUTHE

City

MARIETTA

State

GA

Zip Code

30067-5164

FEC ID number of contributing
federal political committee.

C

Name of Employer

BDO CONSULTING CORP. ADVISORS LLC

Occupation

MANAGMENT CONSULTANT

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : SA11.4558

Amount of Each Receipt this Period

100.00

CONTRIBUTION

EARMARKED FROM SBA LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial)

SBA LIST CANDIDATE FUND

Mailing Address 1707 L STREET NW, STE 550

City

WASHINGTON

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.

C C00332296

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

13169.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : SA11.4536

Amount of Each Receipt this Period

345.00

[MEMO ITEM]
SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)

SBA LIST CANDIDATE FUND

Mailing Address 1707 L STREET NW, STE 550

City

WASHINGTON

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.

C C00332296

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

13169.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2014

Transaction ID : SA11.4658

Amount of Each Receipt this Period

470.00

[MEMO ITEM]
SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11.4536

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT EFFECTED.

Form/Schedule: SA11AI
Transaction ID: SA11.4658

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT EFFECTED.

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 64 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

SBA LIST CANDIDATE FUND

A.

Mailing Address 1707 L STREET NW, STE 550

City

WASHINGTON

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.

C

C00332296

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

13169.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		03		2014

Transaction ID : SA11.4659

Amount of Each Receipt this Period

490.00

[MEMO ITEM]

SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

97663.01

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SA11AI
Transaction ID : SA11.4659

TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT EFFECTED.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 66 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
JOHN RATCLIFFE FOR CONGRESS

Mailing Address 2931 RIDGE ROAD SUITE 101-217

City State Zip Code
 ROCKWALL TX 75032-6670

FEC ID number of contributing
federal political committee.

C C00554113

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 10 30 2014

Transaction ID : SA11.4563

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KEVIN MCCARTHY FOR CONGRESS

Mailing Address PO BOX 12667

City State Zip Code
 BAKERSFIELD CA 93389-2667

FEC ID number of contributing
federal political committee.

C C00420935

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 10 20 2014

Transaction ID : SA11.4306

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LUKE MESSER FOR CONGRESS

Mailing Address PO BOX 917

City State Zip Code
 SHELBYVILLE IN 46176-0917

FEC ID number of contributing
federal political committee.

C C00460667

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 11 03 2014

Transaction ID : SA11.4621

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 67 OF 173

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)
VOTETIPTON.COM

A. Mailing Address **PO BOX 1582**

City	State	Zip Code
CORTEZ	CO	81321-1582

FEC ID number of contributing federal political committee.

C C00470757

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.4273

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. **COMMITTEE TO ELECT DEREK P CHAMPAGNE**

Mailing Address **PO BOX 762**

City	State	Zip Code
MALONE	NY	12953-0762

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11.4692

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. **ESSEX COUNTY REPUBLICAN COMMITTEE**

Mailing Address **PO BOX 6**

City	State	Zip Code
OLMSTEDVILLE	NY	12857-0006

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11.4698

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

3050.00

TOTAL This Period (last page this line number only).....

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11C

Transaction ID : SA11.4692

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

Form/Schedule: SA11C

Transaction ID: SA11.4698

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
FRANKLIN COUNTY REPUBLICAN COMMITTEE

Mailing Address 201 COUNTY ROUTE 24

City State Zip Code
 MALONE NY 12953-3925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y
 11 04 2014

Transaction ID : SA11.4699

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FRIENDS OF BETTY LITTLE

Mailing Address PO BOX 4730

City State Zip Code
 QUEENSBURY NY 12804-0730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 10 16 2014

Transaction ID : SA11.4248

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HAMILTON COUNTY REPUBLICAN COMMITTEE

Mailing Address PO BOX 253

City State Zip Code
 SPECULATOR NY 12164-0253

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 11 04 2014

Transaction ID : SA11.4696

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1800.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11C
Transaction ID : SA11.4699

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

Form/Schedule: SA11C
Transaction ID: SA11.4248

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11C
Transaction ID : SA11.4696

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 OF 173

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
ST. LAWRENCE COUNTY REPUBLICAN COMMITTEE

Mailing Address 11 FAIRLANE DRIVE

City	State	Zip Code
CANTON	NY	13617-2111

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.4423

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

FEDERALLY PERMISSIBLE FUNDS

B. Full Name (Last, First, Middle Initial)
STEC FOR ASSEMBLY

Mailing Address PO BOX 4668

City	State	Zip Code
QUEENSBURY	NY	12804-0668

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11.4701

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEC FOR ASSEMBLY

Mailing Address PO BOX 4668

City	State	Zip Code
QUEENSBURY	NY	12804-0668

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11.4702

Amount of Each Receipt this Period

150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1400.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11C

Transaction ID : SA11.4701

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

Form/Schedule: SA11C

Transaction ID: SA11.4702

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 173

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress**A.** Full Name (Last, First, Middle Initial)
WASHINGTON COUNTY REPUBLICAN COMMITTEE

Mailing Address 184 GLEN STREET

City	State	Zip Code
GLENS FALLS	NY	12801-3526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

Transaction ID : SA11.4704

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WOMEN'S REPUBLICAN CLUB OF SARATOGA COUNTY

Mailing Address PO BOX 148

City	State	Zip Code
BALLSTON SPA	NY	12020-0148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

Transaction ID : SA11.4697

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AGRI-MARK INC PAC

Mailing Address 100 MILK STREET

City	State	Zip Code
METHUEN	MA	01844-4600

FEC ID number of contributing
federal political committee.

C C00141242

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4483

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2000.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SA11C

Transaction ID : SA11.4704

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

Form/Schedule: SA11C

Transaction ID: SA11.4697

COMMITTEE SENT LETTER TO VERIFY PERMISSIBILITY OF FUNDS.

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 76 OF 173

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Elise for Congress
A. Full Name (Last, First, Middle Initial)
AIR TRANSPORT SERVICES GROUP INC PAC

Mailing Address 145 HUNTER DRIVE

City	State	Zip Code
WILMINGTON	OH	45177-9550

FEC ID number of contributing federal political committee.

C C00238311

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4622

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ALTRIA GROUP INC PAC

Mailing Address 101 CONSTITUTION AVE NW SUITE 400W

City	State	Zip Code
WASHINGTON	DC	20001-2155

FEC ID number of contributing federal political committee.

C C00089136

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2014

Transaction ID : SA11.4691

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION PAC

Mailing Address 1891 PRESTON WHITE DRIVE

City	State	Zip Code
RESTON	VA	20191-4326

FEC ID number of contributing federal political committee.

C C00343459

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2014

Transaction ID : SA11.4452

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 77 OF 173

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

AMERICAN DENTAL ASSOCIATION PAC

Mailing Address 1111 14TH STREET NW SUITE 1100

City

WASHINGTON

State

DC

Zip Code

20005-5627

FEC ID number of contributing
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : SA11.4582

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

AMERICAN FINANCIAL SERVICES ASSOCIATION PAC

Mailing Address 919 EIGHTEENTH ST, NW STE 300

City

WASHINGTON

State

DC

Zip Code

20006-5526

FEC ID number of contributing
federal political committee.

C C00038604

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2014

Transaction ID : SA11.4532

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

ANHEUSER-BUSCH COMPANIES INC. PAC

Mailing Address ONE BUSCH PLACE 202-7

City

ST. LOUIS

State

MO

Zip Code

63118-1849

FEC ID number of contributing
federal political committee.

C C00034488

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		27		2014

Transaction ID : SA11.4451

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

6000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 78 OF 173

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

ASSOCIATED EQUIPMENT DISTRIBUTORS PAC

Mailing Address 121 N HENRY STREET

City	State	Zip Code
ALEXANDRIA	VA	22314-2903

FEC ID number of contributing federal political committee.

C C00010124

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.4418

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

BENTLEY SYSTEMS FEDERAL PAC

Mailing Address 685 STOCKTON DR

City	State	Zip Code
EXTON	PA	19341-1151

FEC ID number of contributing federal political committee.

C C00408138

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.4411

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

COMCAST CORPORATION & NBC UNIVERSAL PAC

Mailing Address 1701 JFK BLVD 49TH FLOOR

City	State	Zip Code
PHILADELPHIA	PA	19103-2855

FEC ID number of contributing federal political committee.

C C00248716

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11.4649

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 79 OF 173

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	-------------------------------------	--	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

CONSERVATIVES RESTORING EXCELLENCE PAC

Mailing Address PO BOX 98629

City

RALEIGH

State

NC

Zip Code

27624-8629

FEC ID number of contributing
federal political committee.

C C00502187

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : SA11.4416

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

COUNCIL OF INSURANCE AGENTS & BROKERS PAC

Mailing Address 701 PENNSYLVANIA AVE NW SUITE 750

City

WASHINGTON

State

DC

Zip Code

20004-2661

FEC ID number of contributing
federal political committee.

C C00039578

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.4270

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

DALLAS SAFARI CLUB PAC (DSC PAC)

Mailing Address 310 SOUTH ROSS

City

MEXIA

State

TX

Zip Code

76667-3335

FEC ID number of contributing
federal political committee.

C C00356477

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : SA11.4623

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 80 OF 173

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

ERNST & YOUNG PAC

A.

Mailing Address 1101 NEW YORK AVE, NW

City

WASHINGTON

State

DC

Zip Code

20005-4269

FEC ID number of contributing
federal political committee.

C C00227744

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		17		2014

Transaction ID : SA11.4274

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

EYE OF THE TIGER PAC

B.

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152

FEC ID number of contributing
federal political committee.

C C00467431

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

3765.44

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		04		2014

Transaction ID : SA11.4766C

Amount of Each Receipt this Period

2515.44

IN-KIND CONTRIBUTION

IN-KIND FOOD/BEVERAGES/TRAVEL

Full Name (Last, First, Middle Initial)

FLORIDA CRYSTALS CORPORATION PAC

C.

Mailing Address 401 9TH ST NW SUITE 640

City

WASHINGTON

State

DC

Zip Code

20004-2163

FEC ID number of contributing
federal political committee.

C C00296624

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		16		2014

Transaction ID : SA11.4239

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

8015.44

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 81 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
FLUOR CORPORATION PAC
Mailing Address 6700 LAS COLINAS BLVD

City State Zip Code
IRVING TX 75039-2902

FEC ID number of contributing
federal political committee.

C C00034132

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
10 20 2014

Transaction ID : SA11.4302

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS COPORATION PAC
Mailing Address 2941 FAIRVIEW PARK DRIVE #100

City State Zip Code
FALLS CHURCH VA 22042-4541

FEC ID number of contributing
federal political committee.

C C00078451

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
11 04 2014

Transaction ID : SA11.4647

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HARDWOOD FEDERATION PAC INC
Mailing Address 1101 K STREET NW SUITE 700

City State Zip Code
WASHINGTON DC 20005-4210

FEC ID number of contributing
federal political committee.

C C00396671

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 31 2014

Transaction ID : SA11.4590

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 82 OF 173

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

HONEYWELL INTERNATIONAL PAC

Mailing Address 101 CONSTITUTION AVE NW SUITE 500

City

WASHINGTON

State

DC

Zip Code

20001-2133

FEC ID number of contributing federal political committee.

C C00096156

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Transaction ID : SA11.4276

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

HOUSE CONSERVATIVES FUND

Mailing Address 228 S. WASHINGTON ST SUITE 115

City

ALEXANDRIA

State

VA

Zip Code

22314-

FEC ID number of contributing federal political committee.

C C00326439

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4661

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

INTERNATIONAL PAPER PAC

Mailing Address 1101 PENNSYLVANIA AVE NW SUITE 200

City

WASHINGTON

State

DC

Zip Code

20004-2514

FEC ID number of contributing federal political committee.

C C00034405

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Transaction ID : SA11.4533

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

12500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 83 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial) IPAA WILDCATTERS FUND		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 1201 15TH STREET NW STE 300		Transaction ID : SA11.4648 Amount of Each Receipt this Period 2000.00 CONTRIBUTION
City WASHINGTON	State DC	
Zip Code 20005-2899		
FEC ID number of contributing federal political committee. C C00246306		
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00	

B. Full Name (Last, First, Middle Initial) KEEPING AMERICA ROLLING PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address PO BOX 185		Transaction ID : SA11.4278 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
City HARRISBURG	State PA	
Zip Code 17108-0185		
FEC ID number of contributing federal political committee. C C00524603		
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

C. Full Name (Last, First, Middle Initial) LOVE PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 2470 DANIELLS BRIDGE RD SUITE 121		Transaction ID : SA11.4584 Amount of Each Receipt this Period 1000.00 CONTRIBUTION
City ATHENS	State GA	
Zip Code 30606-6191		
FEC ID number of contributing federal political committee. C C00541680		
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 84 OF 173

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MASSCHUSETTS MUTUAL LIFE INSURANCE CO. PAC (MMPAC)

Mailing Address 1295 STATE ST

City

SPRINGFIELD

State

MA

Zip Code

01111-0001

FEC ID number of contributing
federal political committee.

C C00118943

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2014

Transaction ID : SA11.4685

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL ASSOCIATION OF MUTUAL INSURANCE COMPANIES PAC

Mailing Address 3601 VINCENNES RD

City

INDIANAPOLIS

State

IN

Zip Code

46268-1154

FEC ID number of contributing
federal political committee.

C C00170258

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Transaction ID : SA11.4292

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

NATIONAL CATTLEMEN'S BEEF ASSOCIATION PAC

Mailing Address 1301 PENNSYLVANIA AVE NW STE 300

City

WASHINGTON

State

DC

Zip Code

20004-1701

FEC ID number of contributing
federal political committee.

C C00028787

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2014

Transaction ID : SA11.4269

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 85 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE PAC

Mailing Address PO BOX 619911

City State Zip Code
 DALLAS TX 75261-9911

FEC ID number of contributing
federal political committee.

C C00140061

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 11 03 2014

Transaction ID : SA11.4625

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATIONAL MULTIFAMILY HOUSING COUNCIL PAC

Mailing Address 1850 M STREET NW SUITE 540

City State Zip Code
 WASHINGTON DC 20036-5816

FEC ID number of contributing
federal political committee.

C C00130773

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 10 24 2014

Transaction ID : SA11.4419

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NATIONAL PRO-LIFE ALLIANCE PAC

Mailing Address 4521 WINDSOR ARMS COURT

City State Zip Code
 ANNANDALE VA 22003-5751

FEC ID number of contributing
federal political committee.

C C00358051

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 10 24 2014

Transaction ID : SA11.4422

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

8500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 86 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial)
NATIONAL RESTAURANT ASSOCIATION PAC

Mailing Address 2055 L STREET NW

City State Zip Code
WASHINGTON DC 20036-4983

FEC ID number of contributing
federal political committee.

C C00003764

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
10 24 2014

Transaction ID : SA11.4410

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
OLD CASTLE MATERIALS PAC

Mailing Address 101 CONSTITUTION AVE STE 600W

City State Zip Code
WASHINGTON DC 20001-2147

FEC ID number of contributing
federal political committee.

C C00346353

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
10 30 2014

Transaction ID : SA11.4573

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ONE NATION PAC

Mailing Address PO BOX 10144

City State Zip Code
PALM DESERT CA 92255-0144

FEC ID number of contributing
federal political committee.

C C00468447

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M / D D / Y Y Y Y
10 16 2014

Transaction ID : SA11.4233

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

5700.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 173

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

OUR COUNTRY DESERVES BETTER PAC-TEA PARTY EXPRESS

Mailing Address PO BOX 984

City

WILLOWS

State

CA

Zip Code

95988-0984

FEC ID number of contributing
federal political committee.

C

C00454074

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

Transaction ID : SA11.4686

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PINNACLE WEST CORPORATION PAC

Mailing Address 801 PENNSYLVANIA AVE NW SUITE 214

City

WASHINGTON

State

DC

Zip Code

20004-2680

FEC ID number of contributing
federal political committee.

C

C00015933

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA11.4481

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

PROMOTING OUR REPUBLICAN TEAM PAC

Mailing Address 9856 ARCHER LANE

City

DUBLIN

State

OH

Zip Code

43017-8914

FEC ID number of contributing
federal political committee.

C

C00440032

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : SA11.4624

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

5500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 88 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial) PROSPER NEW YORK PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO BOX 30844		Transaction ID : SA11.4534
City BETHESDA	State MD	
Zip Code 20824-0844		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00529149	Name of Employer	CONTRIBUTION
Occupation	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) RIGHT NOW WOMEN PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address PO BOX 30844		Transaction ID : SA11.4415
City BETHESDA	State MD	
Zip Code 20824-0844		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00551366	Name of Employer	CONTRIBUTION
Occupation	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) SAFARI CLUB INTERNATIONAL PAC (SCI-PAC)		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 4800 W GATES PASS RD		Transaction ID : SA11.4304
City TUCSON	State AZ	
Zip Code 85745-9600		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C C00122101	Name of Employer	CONTRIBUTION
Occupation	Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Election Cycle-to-Date 2500.00		

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 89 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

SARAH PAC

A.

Mailing Address PO BOX 7711

City

ARLINGTON

State

VA

Zip Code

22207-0711

FEC ID number of contributing
federal political committee.

C C00458588

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : SA11.4687

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SUPPORTING CONSERVATIVES OF TODAY AND TOMORROW (SCOTT PAC)

B.

Mailing Address PO BOX 905

City

NEWTON

State

NJ

Zip Code

07860-0905

FEC ID number of contributing
federal political committee.

C C00453324

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 17 / 2014

Transaction ID : SA11.4277

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

SUSAN B. ANTHONY LIST CANDIDATE FUND

C.

Mailing Address 1707 L STREET NW, STE 550

City

WASHINGTON

State

DC

Zip Code

20036-4212

FEC ID number of contributing
federal political committee.

C C00332296

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)

☒ General

Election Cycle-to-Date

1300.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11.4531

Amount of Each Receipt this Period

1300.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

7300.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 90 OF 173

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial) TRUCKING PAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		20		2014
M M	/	D D	/	Y Y Y Y									
10		20		2014									
Mailing Address 430 FIRST STREET SE		Transaction ID : SA11.4303											
City WASHINGTON	State DC	Zip Code 20003-1826	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table> CONTRIBUTION					1000.00					
				1000.00									
FEC ID number of contributing federal political committee. C C00002881													
Name of Employer	Occupation												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00						
				1000.00									
B. Full Name (Last, First, Middle Initial) UNION PACIFIC CORP FUND FOR EFFECTIVE GOVERNMENT		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		17		2014
M M	/	D D	/	Y Y Y Y									
10		17		2014									
Mailing Address 700 13TH STREET NW SUITE 350		Transaction ID : SA11.4275											
City WASHINGTON	State DC	Zip Code 20005-3960	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table> CONTRIBUTION					2500.00					
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FEC ID number of contributing federal political committee. C C00010470													
Name of Employer	Occupation												
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table>						2500.00						
				2500.00									
C. Full Name (Last, First, Middle Initial) UNITEDHEALTH GROUP INC PAC (UNITED HEALTH PAC)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>17</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		17		2014
M M	/	D D	/	Y Y Y Y									
10		17		2014									
Mailing Address 9900 BREN ROAD EAST		Transaction ID : SA11.4272											
City MINNETONKA	State MN	Zip Code 55343-9664	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table> CONTRIBUTION					2500.00					
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FEC ID number of contributing federal political committee. C C00274431													
Name of Employer	Occupation												
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				2500.00									
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="4"></td> <td>6000.00</td> </tr> </table>						6000.00					
				6000.00									
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="4"></td> <td></td> </tr> </table>											

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 91 OF 173

☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial) UPS PAC		Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 55 GLENLAKE PKWY NE		Transaction ID : SA11.4448
City ATLANTA	State GA	Zip Code 30328-3474
FEC ID number of contributing federal political committee. C C00064766		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5000.00

Full Name (Last, First, Middle Initial) VERIZON COMMUNICATIONS INC GOOD GOVERNMENT CLUB (VERIZON PAC)		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 1300 I STREET NW 4TH FLOOR		Transaction ID : SA11.4688
City WASHINGTON	State DC	Zip Code 20005-3314
FEC ID number of contributing federal political committee. C C00186288		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00

Full Name (Last, First, Middle Initial) VIKING LEADERSHIP PAC		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address PO BOX 4616		Transaction ID : SA11.4660
City SAINT PAUL	State MN	Zip Code 55101-4616
FEC ID number of contributing federal political committee. C C00565036		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 92 OF 173

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

A. Full Name (Last, First, Middle Initial) WELLPOINT INC (WELLPAC)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		24		2014
M M	/	D D	/	Y Y Y Y									
10		24		2014									
Mailing Address 120 MONUMENT CIRCLE		Transaction ID : SA11.4420											
City INDIANAPOLIS	State IN	Zip Code 46204-4906											
FEC ID number of contributing federal political committee. C C00197228		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table>						2500.00					
				2500.00									
Name of Employer 		Occupation 											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>2500.00</td> </tr> </table>						2500.00					
				2500.00									
B. Full Name (Last, First, Middle Initial) WOMEN UNDER FORTY PAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		31		2014
M M	/	D D	/	Y Y Y Y									
10		31		2014									
Mailing Address 811 4TH ST UNIT 1208		Transaction ID : SA11.4591											
City WASHINGTON	State DC	Zip Code 20001-4927											
FEC ID number of contributing federal political committee. C C00345942		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>						500.00					
				500.00									
Name of Employer 		Occupation 											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>						500.00					
				500.00									
C. Full Name (Last, First, Middle Initial) YOPAC		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>04</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		04		2014
M M	/	D D	/	Y Y Y Y									
11		04		2014									
Mailing Address 1101 WALNUT UNIT 1101		Transaction ID : SA11.4689											
City KANSAS CITY	State MO	Zip Code 64106-4205											
FEC ID number of contributing federal political committee. C C00497305		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00					
				1000.00									
Name of Employer 		Occupation 											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>1000.00</td> </tr> </table>						1000.00					
				1000.00									
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="4"></td> <td>4000.00</td> </tr> </table>						4000.00					
				4000.00									
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="4"></td> <td>114515.44</td> </tr> </table>						114515.44					
				114515.44									

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 93 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

NEW YORK MAJORITY FUND 2014

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00566216

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2390.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA12.4480

Amount of Each Receipt this Period

2390.36

CONTRIBUTION

SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)

ONEIDA INDIAN NATION

Mailing Address 1 TERRITORY RD

City

ONEIDA

State

NY

Zip Code

13421-9304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SA12.4484

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

REPUBLICANS INSPIRING SUCCESS & EMPOWERMENT PROJECT (RISE PR

Mailing Address PO BOX 2485

City

SPRINGFIELD

State

VA

Zip Code

22152-0485

FEC ID number of contributing
federal political committee.

C C00567677

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

8044.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

Transaction ID : SA11.4429

Amount of Each Receipt this Period

541.82

TRANSFER OF NET JFC PROCEEDS

SUBTOTAL of Receipts This Page (optional).....

2932.18

TOTAL This Period (last page this line number only).....

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SA12
Transaction ID : SA11.4429

NO DONORS MEET THE ITEMIZATION THRESHOLD.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 95 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial)

WINNING WOMEN

Mailing Address 228 S. WASHINGTON STREET STE 115

City

ALEXANDRIA

State

VA

Zip Code

22314-5404

FEC ID number of contributing
federal political committee.

C C00558361

Name of Employer

Occupation

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

81317.77

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		03		2014

Transaction ID : SA12.4620

Amount of Each Receipt this Period

25674.63

CONTRIBUTION

SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial)

ROBERT NATHANIEL CROW

Mailing Address 4015 STONEBRIDGE DR.

City

DALLAS

State

TX

Zip Code

75204-1631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF EMPLOYED

SELF EMPLOYED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2014

Transaction ID : SA12.4637

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

ROGER HERTOOG

Mailing Address 1040 5TH AVE.

City

NEW YORK

State

NY

Zip Code

10028-0137

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

N/A

RETIRED

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		10		2014

Transaction ID : SA12.4634

Amount of Each Receipt this Period

1600.00

CONTRIBUTION

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

25674.63

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 96 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

LARRY A. MIZEL

A.

Mailing Address 4350 S. MONACO ST.

City

DENVER

State

CO

Zip Code

80237-3400

FEC ID number of contributing
federal political committee.

C

Name of Employer

MDC HOLDINGS

Occupation

CHAIRMAN

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA12.4629

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

WILLIAM E. OBERNDORF

B.

Mailing Address 505 SANSOME ST.
#1950

City

SAN FRANCISCO

State

CA

Zip Code

94111-3106

FEC ID number of contributing
federal political committee.

C

Name of Employer

OBERNDORF INDUSTRIES

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

Transaction ID : SA12.4630

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

AMY PHELAN

C.

Mailing Address 645 FIFTH AVE.
21ST FL.

City

NEW YORK

State

NY

Zip Code

10022-5910

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10		05		2014

Transaction ID : SA12.4632

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 97 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
Elise for Congress

Full Name (Last, First, Middle Initial) JOHN C. PHELAN		Date of Receipt M M / D D / Y Y Y Y 10 / 05 / 2014
Mailing Address 645 FIFTH AVE. 21ST FL.		Transaction ID : SA12.4631
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer MSD CAPITAL	Occupation INVESTMENT BANKER	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) JULIAN H. ROBERTSON		Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2014
Mailing Address 101 PARK AVENUE		Transaction ID : SA12.4635
City NEW YORK	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer TIGER MANAGEMENT LLC	Occupation CHAIRMAN	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) CHARLES R. SCHWAB		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2014
Mailing Address P.O. BOX 192861		Transaction ID : SA12.4638
City SAN FRANCISCO	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer CHARLES SCHWAB CORP	Occupation CHAIRMAN/FOUNDER	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 98 OF 173

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

MARIA T. SIMOFF

A.

Mailing Address 66 SAND SPRING RD.

City

MORRISTOWN

State

NJ

Zip Code

07960-6759

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		10		2014

Transaction ID : SA12.4633

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

GORDON M. SINGER

B.

Mailing Address 7 LANGFORD PLACE

City

LONDON

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

ELLIOTT ADVISORS

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		11		2014

Transaction ID : SA12.4636

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

STEPHEN SPRUIELL

C.

Mailing Address 1520 YORK AVE.
21H

City

NEW YORK

State

NY

Zip Code

10028-7008

FEC ID number of contributing
federal political committee.

C

Name of Employer

ELLIOTT MANAGEMENT

Occupation

PUBLIC AFFAIRS

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		27		2014

Transaction ID : SA12.4628

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

28606.81

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.

Form/Schedule: SA12
Transaction ID : SA12.4636

VERIFIED U.S. CITIZEN

Form/Schedule:
Transaction ID:

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. LEONARDO ALCIVAR

Mailing Address PO BOX 338

City	State	Zip Code
WILLSBORO	NY	12996

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 31 / 2014

Amount of Each Disbursement this Period

2142.69

Transaction ID : SB17.990

B. LEONARDO ALCIVAR

Mailing Address PO BOX 338

City	State	Zip Code
WILLSBORO	NY	12996

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
11 / 13 / 2014

Amount of Each Disbursement this Period

4450.78

Transaction ID : SB17.997

C. ALEXANDER BENARD

Mailing Address 1168 CHAIN BRIDGE RD

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
VOID CHECK

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period

-1436.70

Transaction ID : SB17.1096

ORIGINAL CHECK DATE 5/8/14

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5156.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. ALEXANDER BENARD

Mailing Address 1168 CHAIN BRIDGE RD

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
CATERING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2014

Amount of Each Disbursement this Period

1436.70

Transaction ID : SB17.921

B. CHRISTOPHER BUKI

Mailing Address 1900 SOUTH EADS ST APT 115

City	State	Zip Code
ARLINGTON	VA	22202

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

50.90

Transaction ID : SB17.1028

C. ANTHONY CARRAGHER

Mailing Address 373 STATE ROUTE 3 SUITE 4

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2014

Amount of Each Disbursement this Period

410.00

Transaction ID : SB17.912

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1897.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 103 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. PATRICK DEROUCHER

Mailing Address PO BOX 338

City	State	Zip Code
WILLSBORO	NY	12996

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

1183.14

Transaction ID : SB17.991

B. PATRICK DEROUCHER

Mailing Address PO BOX 338

City	State	Zip Code
WILLSBORO	NY	12996

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

2142.69

Transaction ID : SB17.998

C. ETHAN GILBERT

Mailing Address 140 PARK AVE

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

827.26

Transaction ID : SB17.992

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4153.09

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 104 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. ETHAN GILBERT

Mailing Address 140 PARK AVE

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

1838.19

Transaction ID : SB17.999

B. MARIAH KAMPNICH

Mailing Address 23235 KNOWLESVILLE RD

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2014

Amount of Each Disbursement this Period

788.00

Transaction ID : SB17.918

C. MEGAN LAMON

Mailing Address 140 PARK AVE

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2014

Amount of Each Disbursement this Period

786.00

Transaction ID : SB17.919

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3412.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. LUKE MAHONEY

Mailing Address PO BOX 308

City	State	Zip Code
WILLSBORO	NY	12996

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

1609.82

Transaction ID : SB17.1000

B. LUKE MAHONEY

Mailing Address 373 STATE ROUTE 3

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

590.17

Transaction ID : SB17.1032

C. MAPLEFIELDS AT PLATT

Mailing Address 456 STATE RT 3

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

294.56

Transaction ID : SB17.1032A

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2199.99

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 106 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. SUNOCO

Mailing Address 3953 NYS RT 22

City	State	Zip Code
WILLSBORO	NY	12996

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

127.97

Transaction ID : SB17.1032B

[MEMO ITEM]**B. LUKE MAHONEY**

Mailing Address 373 STATE ROUTE 3

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2014

Amount of Each Disbursement this Period

553.87

Transaction ID : SB17.1049

C. MAPLEFIELDS AT PLATT

Mailing Address 456 STATE RT 3

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2014

Amount of Each Disbursement this Period

141.42

Transaction ID : SB17.1049B

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

553.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 107 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. SUNOCO

Mailing Address 3953 NYS RT 22

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2014

City	State	Zip Code
WILLSBORO	NY	12996

Amount of Each Disbursement this Period

214.03

Purpose of Disbursement
TRAVELCategory/
Type

Transaction ID : SB17.1049A

[MEMO ITEM]

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. LUKE MAHONEY

Mailing Address 373 STATE ROUTE 3

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

City	State	Zip Code
PLATTSBURGH	NY	12901

Amount of Each Disbursement this Period

367.52

Purpose of Disbursement
TRAVELCategory/
Type

Transaction ID : SB17.1094

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. SUNOCO

Mailing Address 3953 NYS RT 22

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

City	State	Zip Code
WILLSBORO	NY	12996

Amount of Each Disbursement this Period

367.52

Purpose of Disbursement
TRAVELCategory/
Type

Transaction ID : SB17.1094A

[MEMO ITEM]

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

367.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 108 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. LUKE MAHONEY

Mailing Address PO BOX 308

City	State	Zip Code
WILLSBORO	NY	12996

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 31 / 2014

Amount of Each Disbursement this Period

546.10

Transaction ID : SB17.993

B. JOSH MARCOLINA

Mailing Address 186 EATONTOWN RD

City	State	Zip Code
MIDDLETOWN	NY	10940

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 16 / 2014

Amount of Each Disbursement this Period

660.00

Transaction ID : SB17.911

C. JOSH MARCOLINA

Mailing Address 186 EATONTOWN RD

City	State	Zip Code
MIDDLETOWN	NY	10940

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period

610.00

Transaction ID : SB17.914

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1816.10

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 109 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. JOSH MARCOLINA

Mailing Address 186 EATONTOWN RD

City	State	Zip Code
MIDDLETOWN	NY	10940

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

340.00

Transaction ID : SB17.920

B. MATT MASTERSON

Mailing Address 533 E 8TH AVE

City	State	Zip Code
TALLAHASSEE	FL	32301

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

12648.03

Transaction ID : SB17.1001

C. MATT MASTERSON

Mailing Address 533 E 8TH AVE

City	State	Zip Code
TALLAHASSEE	FL	32301

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

171.20

Transaction ID : SB17.1029

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

13159.23

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 110 OF 173

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. MATT MASTERSON

Mailing Address 533 E 8TH AVE

City State Zip Code
TALLAHASSEE FL 32301

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period

223.35

Transaction ID : SB17.960

B. MATT MASTERSON

Mailing Address 533 E 8TH AVE

City State Zip Code
TALLAHASSEE FL 32301

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 31 / 2014

Amount of Each Disbursement this Period

2511.41

Transaction ID : SB17.994

C. JACK MOULTON

Mailing Address 1465 CASTLERIDGE RD

City State Zip Code
CASTLETON NY 12033

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 13 / 2014

Amount of Each Disbursement this Period

1902.76

Transaction ID : SB17.1002

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

4637.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 111 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. JACK MOULTON

Mailing Address 1465 CASTLERIDGE RD

City	State	Zip Code
CASTLETON	NY	12033

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

951.15

Transaction ID : SB17.995

B. EMILY PELTIER

Mailing Address 7 FRANK ST

City	State	Zip Code
BALLSTON LAKE	NY	10219

Purpose of Disbursement
CAMPAIGN CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

165.00

Transaction ID : SB17.917

C. ANTHONY PILEGGI

Mailing Address 79 WARREN STREET APT 306

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

7599.05

Transaction ID : SB17.1003

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8715.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. ANTHONY PILEGGI

Mailing Address 79 WARREN STREET APT 306

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

174.00

Transaction ID : SB17.1030

B. ANTHONY PILEGGI

Mailing Address 79 WARREN STREET APT 306

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

1746.52

Transaction ID : SB17.996

C. ADIRONDACK ADVERTISING

Mailing Address 178 BROAD ST

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.976

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3420.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 113 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. ADP

Mailing Address PO BOX 842875

City	State	Zip Code
BOSTON	MA	02284

Purpose of Disbursement
PAYROLL TAXES/SERVICE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

Amount of Each Disbursement this Period

100.65

Transaction ID : SB17.1004

B. ADP

Mailing Address PO BOX 842875

City	State	Zip Code
BOSTON	MA	02284

Purpose of Disbursement
PAYROLL TAXES/SERVICE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

75.65

Transaction ID : SB17.1006

C. AIR CHARTER TEAM INC

Mailing Address 4151 N MULBERRY DR SUITE 250

City	State	Zip Code
KANSAS CITY	MO	64116

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		26		2014

Amount of Each Disbursement this Period

3423.02

Transaction ID : SB17.1093

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3599.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 114 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. ALAMO RENT-A-CAR

Mailing Address 600 CORPORATE PARK DR

City	State	Zip Code
ST LOUIS	MO	63105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

142.64

Transaction ID : SB17.1048

B. ALBANY COUNTY AIRPORT

Mailing Address 737 ALBANY SHAKER RD

City	State	Zip Code
ALBANY	NY	12211

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2014

Amount of Each Disbursement this Period

38.00

Transaction ID : SB17.1050

C. ALBANY COUNTY AIRPORT

Mailing Address 737 ALBANY SHAKER RD

City	State	Zip Code
ALBANY	NY	12211

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2014

Amount of Each Disbursement this Period

117.00

Transaction ID : SB17.1058

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

297.64

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 981532

City	State	Zip Code
EL PASO	TX	79998

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2014

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.926

B. AMERICAN EXPRESS

Mailing Address PO BOX 981532

City	State	Zip Code
EL PASO	TX	79998

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

938.21

Transaction ID : SB17.928

C. AMERICAN VIEWPOINT INC

Mailing Address 300 NORTH LEE STREET STE 400

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
SURVEY RESEARCH

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.1023

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

10946.16

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 116 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. AMORINI PANINI

Mailing Address 906 F ST NW

City	State	Zip Code
WASHINGTON	DC	20004

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2014

Amount of Each Disbursement this Period

12.13

Transaction ID : SB17.969

B. BEAN'S COUNTRY STORE

Mailing Address 1128 RIDGE RD

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

Amount of Each Disbursement this Period

37.66

Transaction ID : SB17.957

C. BEAN'S COUNTRY STORE

Mailing Address 1128 RIDGE RD

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

117.90

Transaction ID : SB17.965

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

167.69

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. BEHAN COMMUNICATIONS INC

Mailing Address 19 DOVE STREET STE 202

City	State	Zip Code
ALBANY	NY	12210

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 06 / 2014

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.1008

B. BEHAN COMMUNICATIONS INC

Mailing Address 19 DOVE STREET STE 202

City	State	Zip Code
ALBANY	NY	12210

Purpose of Disbursement
COMMUNICATIONS CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 16 / 2014

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.922

C. BULLPEN TAVERN

Mailing Address 216 GLEN ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 08 / 2014

Amount of Each Disbursement this Period

65.87

Transaction ID : SB17.967

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8065.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. CAMEL TRADERS ACES

Mailing Address 7 MONROE ST

City	State	Zip Code
TROY	NY	12180

Purpose of Disbursement
EQUIPMENT PURCHASE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		18		2014

Amount of Each Disbursement this Period

108.00

Transaction ID : SB17.934

B. CAMPAIGNHQ

Mailing Address 700 PLEASANT ST

City	State	Zip Code
BROOKLYN	IA	52211

Purpose of Disbursement
MESSAGE PHONE CALLS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

805.82

Transaction ID : SB17.983

C. CAMS PIZZERIA

Mailing Address 25 PUBLIC SQUARE

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2014

Amount of Each Disbursement this Period

31.20

Transaction ID : SB17.947

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

945.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. CAPITOL HILL SUITES

Mailing Address 200 C ST SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		22		2014

Amount of Each Disbursement this Period

6	5	4	3	2	1	0	9	8	7	6	5	4	3	2	1	0	.	0	0

Transaction ID : SB17.1092

B. CAVA GRILL

Mailing Address 707 H ST NW

City
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2014

Amount of Each Disbursement this Period

3	4	4	9	0	0	0	0	0	0	0	0	0	0	0	0	0	.	0	0

Transaction ID : SB17.968

C. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City
TYSONS CORNERState
VAZip Code
22182Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		22		2014

Amount of Each Disbursement this Period

5	6	1	.	4	9	0	0	0	0	0	0	0	0	0	0	0	.	0	0

Transaction ID : SB17.924

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

613.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2014

Amount of Each Disbursement this Period

730.61

Transaction ID : SB17.925

B. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

665.67

Transaction ID : SB17.927

C. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2014

Amount of Each Disbursement this Period

4.19

Transaction ID : SB17.929

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1400.47

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
DATABASE MANAGEMENT SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

798.00

Transaction ID : SB17.930

B. CMDI

Mailing Address 1593 SPRING HILL RD STE 400

City	State	Zip Code
TYSONS CORNER	VA	22182

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

54.64

Transaction ID : SB17.931

C. COFFEE PLANET

Mailing Address 140 GLEN ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

8.51

Transaction ID : SB17.946

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

861.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. COMPLIANCE CONSULTING CO OF VIRGINIA LLC

Mailing Address PO BOX 365

City	State	Zip Code
MCLEAN	VA	22101

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 18 / 2014

Amount of Each Disbursement this Period

4200.00

Transaction ID : SB17.923

B. CSC CAPITAL LLC

Mailing Address 38 CONDON RD

City	State	Zip Code
STILLWATER	NY	12170

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 16 / 2014

Amount of Each Disbursement this Period

5500.00

Transaction ID : SB17.940

C. CSC CAPITAL LLC

Mailing Address 38 CONDON RD

City	State	Zip Code
STILLWATER	NY	12170

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 18 / 2014

Amount of Each Disbursement this Period

5500.00

Transaction ID : SB17.941

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

15200.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. CSC CAPITAL LLC

Mailing Address 38 CONDON RD

City	State	Zip Code
STILLWATER	NY	12170

Purpose of Disbursement
FINANCE CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.942

B. DOLLARTREE

Mailing Address 110 MAIN ST

City	State	Zip Code
GLENS FALLS	NY	12803

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

21.40

Transaction ID : SB17.985

C. DOMINO'S

Mailing Address 144 GLEN ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

47.78

Transaction ID : SB17.1104

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10069.18

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 124 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 311 CORNELIA ST

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

41.92

Transaction ID : SB17.951

B. DUNKIN DONUTS

Mailing Address 311 CORNELIA ST

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2014

Amount of Each Disbursement this Period

41.92

Transaction ID : SB17.958

C. DUNKIN DONUTS

Mailing Address 311 CORNELIA ST

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2014

Amount of Each Disbursement this Period

41.92

Transaction ID : SB17.959

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

125.76

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 125 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. DUNKIN DONUTS

Mailing Address 311 CORNELIA ST

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

51.63

Transaction ID : SB17.964

B. EXXONMOBIL

Mailing Address 3225 GALLOWS RD

City	State	Zip Code
FAIRFAX	VA	22037

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

55.01

Transaction ID : SB17.1027

C. EXXONMOBIL

Mailing Address 3225 GALLOWS RD

City	State	Zip Code
FAIRFAX	VA	22037

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2014

Amount of Each Disbursement this Period

35.61

Transaction ID : SB17.1036

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

142.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 126 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. EXXONMOBIL

Mailing Address 3225 GALLOWS RD

City	State	Zip Code
FAIRFAX	VA	22037

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 23 / 2014

Amount of Each Disbursement this Period

45.10

Transaction ID : SB17.1039

B. EXXONMOBIL

Mailing Address 3225 GALLOWS RD

City	State	Zip Code
FAIRFAX	VA	22037

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 28 / 2014

Amount of Each Disbursement this Period

50.95

Transaction ID : SB17.1051

C. EXXONMOBIL

Mailing Address 3225 GALLOWS RD

City	State	Zip Code
FAIRFAX	VA	22037

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
11 / 03 / 2014

Amount of Each Disbursement this Period

53.51

Transaction ID : SB17.1059

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

149.56

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 127 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN

Mailing Address 250 COMMERCE PARK DR

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

Amount of Each Disbursement this Period

276.40

Transaction ID : SB17.1041

B. FAIRFIELD INN

Mailing Address 250 COMMERCE PARK DR

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

Amount of Each Disbursement this Period

276.40

Transaction ID : SB17.1042

C. FAIRFIELD INN

Mailing Address 250 COMMERCE PARK DR

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2014

Amount of Each Disbursement this Period

446.52

Transaction ID : SB17.1043

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

999.32

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 128 OF 173

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN

Mailing Address 250 COMMERCE PARK DR

City State Zip Code
WATERTOWN NY 13601

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 25 / 2014

Amount of Each Disbursement this Period

446.52

Transaction ID : SB17.1044

Category/
Type

Full Name (Last, First, Middle Initial)

B. FAIRFIELD INN

Mailing Address 250 COMMERCE PARK DR

City State Zip Code
WATERTOWN NY 13601

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period

329.57

Transaction ID : SB17.1062

Category/
Type

Full Name (Last, First, Middle Initial)

C. FAIRFIELD INN

Mailing Address 250 COMMERCE PARK DR

City State Zip Code
WATERTOWN NY 13601

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period

329.57

Transaction ID : SB17.1063

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1105.66

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 129 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 21 CONGRESS STREET #101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

City	State	Zip Code
SARATOGA SPRINGS	NY	12866

Amount of Each Disbursement this Period

32.00

Purpose of Disbursement
DELIVERYCategory/
Type

Transaction ID : SB17.932

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. FIRST NIAGARA BANK

Mailing Address PO BOX 514

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

City	State	Zip Code
LOCKPORT	NY	14095

Amount of Each Disbursement this Period

290.00

Purpose of Disbursement
BANK FEESCategory/
Type

Transaction ID : SB17.909

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. FIRST NIAGARA BANK

Mailing Address PO BOX 514

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2014

City	State	Zip Code
LOCKPORT	NY	14095

Amount of Each Disbursement this Period

224.56

Purpose of Disbursement
BANK FEESCategory/
Type

Transaction ID : SB17.910

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

546.56

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 130 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. FULL MOON TAVERN

Mailing Address 490 GLEN LAKE RD

City	State	Zip Code
LAKE GEORGE	NY	12845

Purpose of Disbursement
FACILITY RENTAL/FOOD/BEVERAGES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
11 / 04 / 2014

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.939

B. GLENS FALLS PRINTING

Mailing Address 51 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
11 / 07 / 2014

Amount of Each Disbursement this Period

108.77

Transaction ID : SB17.1018

C. GRANT GRAPHICS

Mailing Address 610 MAPLE AVE

City	State	Zip Code
SARTOGA SPRINGS	NY	12866

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
10 / 30 / 2014

Amount of Each Disbursement this Period

160.50

Transaction ID : SB17.1016

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4269.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 131 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

51.92

Transaction ID : SB17.1025

B. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2014

Amount of Each Disbursement this Period

51.82

Transaction ID : SB17.1035

C. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

68.95

Transaction ID : SB17.1046

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

172.69

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 132 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 27 / 2014

Amount of Each Disbursement this Period

43.00

Transaction ID : SB17.1047

B. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 01 / 2014

Amount of Each Disbursement this Period

38.00

Transaction ID : SB17.1054

C. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 03 / 2014

Amount of Each Disbursement this Period

67.00

Transaction ID : SB17.1057

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

148.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 133 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.1061

B. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2014

Amount of Each Disbursement this Period

43.50

Transaction ID : SB17.1071

C. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		12		2014

Amount of Each Disbursement this Period

31.50

Transaction ID : SB17.1072

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

125.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 134 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. GULF OIL

Mailing Address 1529 CRESCENT RD

City	State	Zip Code
CLIFTON PARK	NY	12065

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

39.05

Transaction ID : SB17.1073

B. HANNAFORD SUPERMARKET

Mailing Address 175 BROAD ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

83.78

Transaction ID : SB17.950

C. HANNAFORD SUPERMARKET

Mailing Address 175 BROAD ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

36.28

Transaction ID : SB17.962

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

159.11

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 135 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. HANNAFORD SUPERMARKET

Mailing Address 175 BROAD ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
11 / 05 / 2014

Amount of Each Disbursement this Period

10.00

Transaction ID : SB17.966

B. HESS EXPRESS

Mailing Address 7961 BREWERTON RD

City	State	Zip Code
CICERO	NY	13039

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 18 / 2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.1033

C. HESS EXPRESS

Mailing Address 7961 BREWERTON RD

City	State	Zip Code
CICERO	NY	13039

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
10 / 18 / 2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.1034

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

110.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 136 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. HIGH PEAKS SOUND

Mailing Address 386 BURGOYNE RD

City	State	Zip Code
SARATOGA SPRINGS	NY	12866

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

954.89

Transaction ID : SB17.935

B. HIGH PEAKS SOUND

Mailing Address 386 BURGOYNE RD

City	State	Zip Code
SARATOGA SPRINGS	NY	12866

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

1300.00

Transaction ID : SB17.936

C. HOBBY LOBBY

Mailing Address 820 STATE ROUTE 9

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

27.18

Transaction ID : SB17.987

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2282.07

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. HOSLER'S FAMILY RESTAURANT

Mailing Address 607 E MAIN ST

City	State	Zip Code
MALONE	NY	12953

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

Amount of Each Disbursement this Period

110.86

Transaction ID : SB17.956

B. HOTELS.COM

Mailing Address 5400 LBJ FREEWAY SUITE 500

City	State	Zip Code
DALLAS	TX	75240

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

181.30

Transaction ID : SB17.1026

C. HOTELS.COM

Mailing Address 5400 LBJ FREEWAY SUITE 500

City	State	Zip Code
DALLAS	TX	75240

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

Amount of Each Disbursement this Period

134.38

Transaction ID : SB17.1053

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

426.54

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 138 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. HOTELS.COM

Mailing Address 5400 LBJ FREEWAY SUITE 500

City	State	Zip Code
DALLAS	TX	75240

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

134.38

Transaction ID : SB17.1060

B. I360 LLC

Mailing Address PO BOX 37046

City	State	Zip Code
BALTIMORE	MD	21297

Purpose of Disbursement
SUBSCRIPTIONS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2014

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.1021

C. IMGE LLC

Mailing Address 603 KING ST 4TH FL

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
WEB SERVICE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		28		2014

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.1102

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10484.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. IMGE LLC

Mailing Address 603 KING ST 4TH FL

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
DIGITAL CONSULTING/TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 18 / 2014

Amount of Each Disbursement this Period

13876.54

Transaction ID : SB17.933

B. INTERNAL REVENUE SERVICE

Mailing Address 1111 CONSTITUTION AVE NW

City	State	Zip Code
WASHINGTON	DC	20224

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 30 / 2014

Amount of Each Disbursement this Period

4723.26

Transaction ID : SB17.1005

C. INTERNAL REVENUE SERVICE

Mailing Address 1111 CONSTITUTION AVE NW

City	State	Zip Code
WASHINGTON	DC	20224

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
11 / 13 / 2014

Amount of Each Disbursement this Period

25579.06

Transaction ID : SB17.1007

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

44178.86

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 4055 CORPORATE DR STE 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2014

City	State	Zip Code
GRAPEVINE	TX	76051

Purpose of Disbursement
SUBSCRIPTIONS

Amount of Each Disbursement this Period

29.11

Transaction ID : SB17.1022

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. INTUIT

Mailing Address 4055 CORPORATE DR STE 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2014

City	State	Zip Code
GRAPEVINE	TX	76051

Purpose of Disbursement
OFFICE SUPPLIES

Amount of Each Disbursement this Period

175.95

Transaction ID : SB17.988

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. JOHNNY D'S RESTAURANT

Mailing Address 1 PUBLIC SQUARE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2014

City	State	Zip Code
WATERTOWN	NY	13601

Purpose of Disbursement
FOOD/BEVERAGES

Amount of Each Disbursement this Period

62.69

Transaction ID : SB17.948

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

267.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. LE BON CAFE

Mailing Address 210 2ND ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		22		2014

Amount of Each Disbursement this Period

8.64

Transaction ID : SB17.970

B. LOWE'S

Mailing Address 251 QUAKER RD

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

7.46

Transaction ID : SB17.986

C. LUKOIL

Mailing Address 127 RIDGE ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

36.88

Transaction ID : SB17.1103

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

52.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. MAJORITY STRATEGIES

Mailing Address 135 PROFESSIONAL DRIVE STE 104

City	State	Zip Code
PONTE VEDRA BEACH	FL	32082

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 16 / 2014

Amount of Each Disbursement this Period

4679.06

Transaction ID : SB17.1019

B. MAJORITY STRATEGIES

Mailing Address 135 PROFESSIONAL DRIVE STE 104

City	State	Zip Code
PONTE VEDRA BEACH	FL	32082

Purpose of Disbursement
PRINTING/POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 18 / 2014

Amount of Each Disbursement this Period

3386.57

Transaction ID : SB17.1020

C. MEDIA AD VENTURES INC

Mailing Address 8136 OLD KEENE MILL RD STE A-300

City	State	Zip Code
SPRINGFIELD	VA	22152

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
10 / 20 / 2014

Amount of Each Disbursement this Period

100000.00

Transaction ID : SB17.973

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

108065.63

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. MEDIA AD VENTURES INC

Mailing Address 8136 OLD KEENE MILL RD STE A-300

City	State	Zip Code
SPRINGFIELD	VA	22152

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		23		2014

Amount of Each Disbursement this Period

30000.00

Transaction ID : SB17.975

B. NEW FRONTIER STRATEGY

Mailing Address 315 KENTUCKY AVE

City	State	Zip Code
ALEXANDRIA	VA	22305

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

30000.00

Transaction ID : SB17.1009

C. NEW YORK PRESS SERVICE INC

Mailing Address 1681 WESTERN AVE

City	State	Zip Code
ALBANY	NY	12203

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2014

Amount of Each Disbursement this Period

15531.26

Transaction ID : SB17.974

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

75531.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 145 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. QUEENSBURY HOTEL

Mailing Address 88 RIDGE ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

67.57

Transaction ID : SB17.1066

B. QUEENSBURY HOTEL

Mailing Address 88 RIDGE ST

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

4189.14

Transaction ID : SB17.1067

C. RAMADA INN

Mailing Address 1 ABBY LANE

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

2060.38

Transaction ID : SB17.1064

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6317.09

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 146 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. RAMADA INN

Mailing Address 1 ABBY LANE

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2014

Amount of Each Disbursement this Period

130.98

Transaction ID : SB17.1065

B. RAMADA INN

Mailing Address 1 ABBY LANE

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		08		2014

Amount of Each Disbursement this Period

140.52

Transaction ID : SB17.1070

C. RAMADA INN

Mailing Address 1 ABBY LANE

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

360.75

Transaction ID : SB17.961

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

632.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 147 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. RED OCTOBER PRODUCTIONS INC

Mailing Address 575 MAIN STREET STE 251

City	State	Zip Code
LAUREL	MD	20707

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		18		2014

Amount of Each Disbursement this Period

2472.50

Transaction ID : SB17.972

B. RED OCTOBER PRODUCTIONS INC

Mailing Address 575 MAIN STREET STE 251

City	State	Zip Code
LAUREL	MD	20707

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2014

Amount of Each Disbursement this Period

5294.37

Transaction ID : SB17.977

C. RED OCTOBER PRODUCTIONS INC

Mailing Address 575 MAIN STREET STE 251

City	State	Zip Code
LAUREL	MD	20707

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2014

Amount of Each Disbursement this Period

8016.65

Transaction ID : SB17.978

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

15783.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 148 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. RING LLC

Mailing Address 4223 ELMWAY DRIVE

City	State	Zip Code
TOLEDO	OH	43614

Purpose of Disbursement
MESSAGE PHONE CALLS

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2014

Amount of Each Disbursement this Period

6000.00

Transaction ID : SB17.981

B. RING LLC

Mailing Address 4223 ELMWAY DRIVE

City	State	Zip Code
TOLEDO	OH	43614

Purpose of Disbursement
MESSAGE PHONE CALLS

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

20000.00

Transaction ID : SB17.982

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City	State	Zip Code
DALLAS	TX	75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		24		2014

Amount of Each Disbursement this Period

474.20

Transaction ID : SB17.1040

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

26474.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 149 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DR

City	State	Zip Code
DALLAS	TX	75235

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

12345678901234567890	8.00
----------------------	------

Transaction ID : SB17.1045

B. STAPLES

Mailing Address 752 UPPERGLEN ST

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		18		2014

Amount of Each Disbursement this Period

12345678901234567890	96.60
----------------------	-------

Transaction ID : SB17.984

C. STAPLES

Mailing Address 752 UPPERGLEN ST

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		10		2014

Amount of Each Disbursement this Period

12345678901234567890	22.42
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Transaction ID : SB17.989

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

127.02

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 150 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. STEWARTS SHOP

Mailing Address 4717 STATE ROUTE 9

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		29		2014

Amount of Each Disbursement this Period

27.50

Transaction ID : SB17.1052

B. STEWARTS SHOP

Mailing Address 4717 STATE ROUTE 9

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

2.29

Transaction ID : SB17.1068

C. STEWARTS SHOP

Mailing Address 4717 STATE ROUTE 9

City	State	Zip Code
PLATTSBURGH	NY	12901

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

24.00

Transaction ID : SB17.1069

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

53.79

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 151 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. STRATEGIC ADVANCE SERVICES LLC

Mailing Address 611 PENNSYLVANIA AVE SE #267

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

4000.00

Transaction ID : SB17.1031

B. STRATEGIC PARTNERS & MEDIA INC

Mailing Address 575 MAIN ST STE 251

City	State	Zip Code
LAUREL	MD	20707

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2014

Amount of Each Disbursement this Period

6000.00

Transaction ID : SB17.979

C. STRATEGIC PARTNERS & MEDIA INC

Mailing Address 575 MAIN ST STE 251

City	State	Zip Code
LAUREL	MD	20707

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2014

Amount of Each Disbursement this Period

20000.00

Transaction ID : SB17.980

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

30000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 152 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. SUNOCO

Mailing Address 353 N PETERSBORO ST I-90

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2014

City	State	Zip Code
CANASTOTA	NY	13032

Amount of Each Disbursement this Period

54.26

Purpose of Disbursement
TRAVELCategory/
Type**Transaction ID : SB17.1037**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. SUNOCO

Mailing Address 353 N PETERSBORO ST I-90

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		20		2014

City	State	Zip Code
CANASTOTA	NY	13032

Amount of Each Disbursement this Period

43.57

Purpose of Disbursement
TRAVELCategory/
Type**Transaction ID : SB17.1038**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. SUNOCO

Mailing Address 353 N PETERSBORO ST I-90

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

City	State	Zip Code
CANASTOTA	NY	13032

Amount of Each Disbursement this Period

43.01

Purpose of Disbursement
TRAVELCategory/
Type**Transaction ID : SB17.1055**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

140.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 153 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. SUNOCO

Mailing Address 353 N PETERSBORO ST I-90

City	State	Zip Code
CANASTOTA	NY	13032

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		03		2014

Amount of Each Disbursement this Period

40.68

Transaction ID : SB17.1056

B. SUPER COLOR DIGITAL

Mailing Address 16761 HALE AVE

City	State	Zip Code
IRVINE	CA	92606

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

570.00

Transaction ID : SB17.1017

C. TALK OF THE TOWN RESTAURANT

Mailing Address 74 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

114.35

Transaction ID : SB17.952

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

725.03

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. TALK OF THE TOWN RESTAURANT

Mailing Address 74 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		31		2014

Amount of Each Disbursement this Period

10.15

Transaction ID : SB17.954

B. TALK OF THE TOWN RESTAURANT

Mailing Address 74 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
FOOD/BEVERAGES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		05		2014

Amount of Each Disbursement this Period

149.25

Transaction ID : SB17.963

C. THE TOWNSEND GROUP

Mailing Address 1006 PENDLETON STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement
FINANCE CONSULTING/TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2014

Amount of Each Disbursement this Period

19257.63

Transaction ID : SB17.943

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

19417.03

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 155 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. TIME WARNER CABLE

Mailing Address PO BOX 70872

City	State	Zip Code
CHARLOTTE	NC	28272

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2014

Amount of Each Disbursement this Period

210.88

Transaction ID : SB17.1095

B. U-HAUL CENTER

Mailing Address 6229 US 11

City	State	Zip Code
CANTON	NY	13617

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2014

Amount of Each Disbursement this Period

2.95

Transaction ID : SB17.937

C. U-HAUL CENTER

Mailing Address 6229 US 11

City	State	Zip Code
CANTON	NY	13617

Purpose of Disbursement
EQUIPMENT RENTAL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2014

Amount of Each Disbursement this Period

122.22

Transaction ID : SB17.938

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

336.05

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 156 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

13.06

Transaction ID : SB17.1074

B. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.1076

C. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2014

Amount of Each Disbursement this Period

16.00

Transaction ID : SB17.1077

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

44.06

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 157 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2014

Amount of Each Disbursement this Period

18.00

Transaction ID : SB17.1078

B. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.1079

C. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2014

Amount of Each Disbursement this Period

16.00

Transaction ID : SB17.1080

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

49.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		15		2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.1081

B. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2014

Amount of Each Disbursement this Period

17.00

Transaction ID : SB17.1082

C. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.1083

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

47.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 159 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2014

Amount of Each Disbursement this Period

67.00

Transaction ID : SB17.1084

B. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		17		2014

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.1085

C. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		19		2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.1086

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

67.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 160 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		20		2014

Amount of Each Disbursement this Period

9.74

Transaction ID : SB17.1087

B. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2014

Amount of Each Disbursement this Period

7.01

Transaction ID : SB17.1088

C. UBER

Mailing Address 182 HOWARD ST STE #8

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2014

Amount of Each Disbursement this Period

33.00

Transaction ID : SB17.1091

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

49.75

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 161 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		13		2014

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.1075

B. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2014

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.1089

C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		21		2014

Amount of Each Disbursement this Period

25.00

Transaction ID : SB17.1090

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

65.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 162 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 16 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		25		2014

Amount of Each Disbursement this Period

245.00

Transaction ID : SB17.1010

B. USPS

Mailing Address 16 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

19.15

Transaction ID : SB17.1011

c. USPS

Mailing Address 16 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2014

Amount of Each Disbursement this Period

13.00

Transaction ID : SB17.1012

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

277.15

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 163 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 16 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2014

Amount of Each Disbursement this Period

32.99

Transaction ID : SB17.1013

B. USPS

Mailing Address 16 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2014

Amount of Each Disbursement this Period

227.82

Transaction ID : SB17.1014

c. USPS

Mailing Address 16 HUDSON AVE

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		14		2014

Amount of Each Disbursement this Period

37.87

Transaction ID : SB17.1015

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

298.68

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 164 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. VERIZON WIRELESS

Mailing Address PO BOX 25505

City	State	Zip Code
LEHIGH VALLEY	PA	18002

Purpose of Disbursement
TELEPHONE SERVICE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		27		2014

Amount of Each Disbursement this Period

205.47

Transaction ID : SB17.1024

B. WALMART SUPERCENTER

Mailing Address 891 STATE ROUTE 9

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
FOOD/BEVERAGE/OFFICE SUPPLIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		30		2014

Amount of Each Disbursement this Period

112.33

Transaction ID : SB17.944

C. WALMART SUPERCENTER

Mailing Address 891 STATE ROUTE 9

City	State	Zip Code
QUEENSBURY	NY	12804

Purpose of Disbursement
FOOD/BEVERAGE/OFFICE SUPPLIES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		01		2014

Amount of Each Disbursement this Period

85.80

Transaction ID : SB17.945

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

403.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 165 OF 173

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Elise for Congress

Full Name (Last, First, Middle Initial)

A. WILEY REIN LLP

Mailing Address 1776 K ST NW

City	State	Zip Code
WASHINGTON	DC	20006

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
10		16		2014

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17.971

B. EYE OF THE TIGER PAC

Mailing Address PO BOX 2485

City	State	Zip Code
SPRINGFIELD	VA	22152

Purpose of Disbursement
IN-KIND FOOD/BEVERAGES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2014
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		04		2014

Amount of Each Disbursement this Period

2515.44

Transaction ID : SB17.4766B

C.

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	
	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5015.44

458821.56

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 168 OF 173

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13bNAME OF COMMITTEE (In Full)
Elise for Congress

Transaction ID : SC/10.5374

LOAN SOURCE Full Name (Last, First, Middle Initial)

ELISE M STEFANIK

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO BOX 17

City

State

ZIP Code

WILLSBORO

NY

12996

Original Amount of Loan

15000.00

Cumulative Payment To Date

15000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
09 / 24 / 2013

Date Due

M M / D D / Y Y Y Y
ON DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SC/10
Transaction ID : SC/10.5374

The interest rate for Candidate's Loan is none. The Commission's software specifications do not permit text in the interest rate fields on Schedule C.

Form/Schedule:
Transaction ID:

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 170 OF 173

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC.1234

Elise for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Elise M. Stefanik

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
PO Box 17

City

State

ZIP Code

Willsboro

NY

12996

Original Amount of Loan

20000.00

Cumulative Payment To Date

20000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

M M / D D / Y Y
05 / 30 / 2014

Date Due

M M / D D / Y Y
ON DEMAND

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

0.00

TOTALS This Period (last page in this line only)..... ►

0.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: SC/10

Transaction ID : SC.1234

The interest rate for Candidate's Loan is none. The Commission's software specifications do not permit text in the interest rate fields on Schedule C.

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 172 OF 173

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Elise for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CSC CAPITAL LLCNature of Debt (Purpose):
FINANCE CONSULTING

Mailing Address 38 CONDON ROAD

City State

Zip Code

STILLWATER

NY

12170

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.890

Amount Incurred This Period

55000.00

Payment This Period

21000.00

Outstanding Balance at Close of This Period

34000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

NEW FRONTIER STRATEGYNature of Debt (Purpose):
POLITICAL STRATEGY CONSULTING

Mailing Address 315 KENTUCKY AVE

City State

Zip Code

ALEXANDRIA

VA

22305

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.345

Amount Incurred This Period

75000.00

Payment This Period

30000.00

Outstanding Balance at Close of This Period

45000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

RED OCTOBER PRODUCTIONS INCNature of Debt (Purpose):
MEDIA

Mailing Address 575 MAIN ST STE 251

City

State

Zip Code

LAUREL

MD

20707

Outstanding Balance Beginning This Period

2472.50

Transaction ID : SD.5678

Amount Incurred This Period

13311.02

Payment This Period

1311.02

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

79000.00

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 173 OF 173

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Elise for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

THE TOWNSEND GROUPNature of Debt (Purpose):
FINANCE CONSULTING

Mailing Address 1006 PENDLETON STREET

City State

Zip Code

ALEXANDRIA

VA

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.788

Amount Incurred This Period

29581.62

Payment This Period

19257.63

Outstanding Balance at Close of This Period

10323.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

10323.99

2) **TOTALS** This Period (last page this line number only) ▶

89323.99

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

89323.99